

EXHIBIT 2

Government Employees Insurance Company, et al v. Eclipse Medical Imaging, et al
Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
1	0538858690101011	ECLIPSE MEDICAL IMAGING PC	2/27/2017	NF-3 Bill Form / HCFA 1500 Form	1/16/2017	72148	\$ 912.00
2	0538858690101011	ECLIPSE MEDICAL IMAGING PC	2/27/2017	NF-3 Bill Form / HCFA 1500 Form	1/16/2017	72141	\$ 659.79
3	0326595660101060	ECLIPSE MEDICAL IMAGING PC	3/9/2017	NF-3 Bill Form / HCFA 1500 Form	1/24/2017	73221	\$ 878.67
4	0326595660101060	ECLIPSE MEDICAL IMAGING PC	3/20/2017	NF-3 Bill Form / HCFA 1500 Form	2/2/2017	72148	\$ 912.00
5	0326595660101060	ECLIPSE MEDICAL IMAGING PC	3/20/2017	NF-3 Bill Form / HCFA 1500 Form	2/2/2017	72141	\$ 659.79
6	0326595660101060	ECLIPSE MEDICAL IMAGING PC	3/20/2017	NF-3 Bill Form / HCFA 1500 Form	2/6/2017	72148	\$ 912.00
7	0326595660101060	ECLIPSE MEDICAL IMAGING PC	3/20/2017	NF-3 Bill Form / HCFA 1500 Form	2/6/2017	72141	\$ 659.79
8	0326595660101060	ECLIPSE MEDICAL IMAGING PC	3/23/2017	NF-3 Bill Form / HCFA 1500 Form	2/8/2017	72148	\$ 912.00
9	0326595660101060	ECLIPSE MEDICAL IMAGING PC	3/23/2017	NF-3 Bill Form / HCFA 1500 Form	2/8/2017	72141	\$ 659.79
10	0326595660101060	ECLIPSE MEDICAL IMAGING PC	3/31/2017	NF-3 Bill Form / HCFA 1500 Form	2/14/2017	73721	\$ 878.67
11	0326595660101060	ECLIPSE MEDICAL IMAGING PC	3/31/2017	NF-3 Bill Form / HCFA 1500 Form	2/14/2017	73221	\$ 659.00
12	0434378510101088	ECLIPSE MEDICAL IMAGING PC	6/19/2017	NF-3 Bill Form / HCFA 1500 Form	5/5/2017	73721	\$ 878.67
13	0434378510101088	ECLIPSE MEDICAL IMAGING PC	6/19/2017	NF-3 Bill Form / HCFA 1500 Form	5/5/2017	72070	\$ 69.82
14	0434378510101088	ECLIPSE MEDICAL IMAGING PC	6/19/2017	NF-3 Bill Form / HCFA 1500 Form	5/5/2017	72040	\$ 72.20
15	0434378510101088	ECLIPSE MEDICAL IMAGING PC	6/19/2017	NF-3 Bill Form / HCFA 1500 Form	5/8/2017	73221	\$ 878.67
16	0434378510101088	ECLIPSE MEDICAL IMAGING PC	6/19/2017	NF-3 Bill Form / HCFA 1500 Form	5/8/2017	73721	\$ 659.00
17	0434378510101088	ECLIPSE MEDICAL IMAGING PC	6/26/2017	NF-3 Bill Form / HCFA 1500 Form	5/12/2017	72141	\$ 879.73
18	0434378510101088	ECLIPSE MEDICAL IMAGING PC	6/30/2017	NF-3 Bill Form / HCFA 1500 Form	5/18/2017	72070	\$ 69.82
19	0434378510101088	ECLIPSE MEDICAL IMAGING PC	6/30/2017	NF-3 Bill Form / HCFA 1500 Form	5/18/2017	72100	\$ 65.86
20	0434378510101088	ECLIPSE MEDICAL IMAGING PC	6/30/2017	NF-3 Bill Form / HCFA 1500 Form	5/18/2017	72148	\$ 912.00
21	0434378510101088	ECLIPSE MEDICAL IMAGING PC	6/30/2017	NF-3 Bill Form / HCFA 1500 Form	5/18/2017	72040	\$ 72.20
22	0434378510101088	ECLIPSE MEDICAL IMAGING PC	7/10/2017	NF-3 Bill Form / HCFA 1500 Form	5/22/2017	72148	\$ 912.00
23	0434378510101088	ECLIPSE MEDICAL IMAGING PC	7/10/2017	NF-3 Bill Form / HCFA 1500 Form	5/22/2017	72141	\$ 659.79
24	0434378510101088	ECLIPSE MEDICAL IMAGING PC	7/14/2017	NF-3 Bill Form / HCFA 1500 Form	5/31/2017	72148	\$ 912.00
25	0434378510101088	ECLIPSE MEDICAL IMAGING PC	7/14/2017	NF-3 Bill Form / HCFA 1500 Form	5/31/2017	72141	\$ 659.79
26	0434378510101088	ECLIPSE MEDICAL IMAGING PC	7/14/2017	NF-3 Bill Form / HCFA 1500 Form	6/1/2017	72040	\$ 96.27
27	0434378510101088	ECLIPSE MEDICAL IMAGING PC	7/14/2017	NF-3 Bill Form / HCFA 1500 Form	6/1/2017	72100	\$ 65.86
28	0434378510101088	ECLIPSE MEDICAL IMAGING PC	7/14/2017	NF-3 Bill Form / HCFA 1500 Form	6/1/2017	72070	\$ 69.82
29	0472220950101017	ECLIPSE MEDICAL IMAGING PC	7/20/2017	NF-3 Bill Form / HCFA 1500 Form	6/6/2017	70450	\$ 455.47
30	0434378510101088	ECLIPSE MEDICAL IMAGING PC	8/7/2017	NF-3 Bill Form / HCFA 1500 Form	6/23/2017	73721	\$ 878.67
31	0382717140101038	ECLIPSE MEDICAL IMAGING PC	9/22/2017	NF-3 Bill Form / HCFA 1500 Form	8/10/2017	73721	\$ 878.67
32	0467019840101014	ECLIPSE MEDICAL IMAGING PC	9/28/2017	NF-3 Bill Form / HCFA 1500 Form	8/14/2017	73721	\$ 878.67
33	0382717140101038	ECLIPSE MEDICAL IMAGING PC	10/10/2017	NF-3 Bill Form / HCFA 1500 Form	8/25/2017	72141	\$ 659.79
34	0382717140101038	ECLIPSE MEDICAL IMAGING PC	10/10/2017	NF-3 Bill Form / HCFA 1500 Form	8/25/2017	72148	\$ 912.00
35	0332831060101067	ECLIPSE MEDICAL IMAGING PC	11/13/2017	NF-3 Bill Form / HCFA 1500 Form	10/2/2017	72100	\$ 65.86
36	0332831060101067	ECLIPSE MEDICAL IMAGING PC	11/13/2017	NF-3 Bill Form / HCFA 1500 Form	10/2/2017	73560	\$ 55.54
37	0332831060101067	ECLIPSE MEDICAL IMAGING PC	11/13/2017	NF-3 Bill Form / HCFA 1500 Form	10/2/2017	72070	\$ 69.82
38	0332831060101067	ECLIPSE MEDICAL IMAGING PC	11/13/2017	NF-3 Bill Form / HCFA 1500 Form	10/2/2017	73030	\$ 94.69
39	0332831060101067	ECLIPSE MEDICAL IMAGING PC	11/20/2017	NF-3 Bill Form / HCFA 1500 Form	10/6/2017	73721	\$ 878.67
40	0294821070101062	ECLIPSE MEDICAL IMAGING PC	11/30/2017	NF-3 Bill Form / HCFA 1500 Form	10/19/2017	72148	\$ 912.00
41	0332831060101067	ECLIPSE MEDICAL IMAGING PC	12/1/2017	NF-3 Bill Form / HCFA 1500 Form	10/20/2017	72148	\$ 912.00
42	0294821070101062	ECLIPSE MEDICAL IMAGING PC	12/4/2017	NF-3 Bill Form / HCFA 1500 Form	10/23/2017	72141	\$ 879.73
43	0350093020101052	ECLIPSE MEDICAL IMAGING PC	12/11/2017	NF-3 Bill Form / HCFA 1500 Form	10/30/2017	73721	\$ 878.67
44	0350093020101052	ECLIPSE MEDICAL IMAGING PC	12/11/2017	NF-3 Bill Form / HCFA 1500 Form	10/30/2017	73221	\$ 659.00
45	0350093020101052	ECLIPSE MEDICAL IMAGING PC	12/26/2017	NF-3 Bill Form / HCFA 1500 Form	11/13/2017	72148	\$ 912.00
46	0350093020101052	ECLIPSE MEDICAL IMAGING PC	12/26/2017	NF-3 Bill Form / HCFA 1500 Form	11/13/2017	72141	\$ 659.79
47	0296629050101129	ECLIPSE MEDICAL IMAGING PC	1/15/2018	NF-3 Bill Form / HCFA 1500 Form	11/30/2017	73721	\$ 878.67
48	0600725510101013	ECLIPSE MEDICAL IMAGING PC	2/5/2018	NF-3 Bill Form / HCFA 1500 Form	12/19/2017	72141	\$ 659.79
49	0600725510101013	ECLIPSE MEDICAL IMAGING PC	2/5/2018	NF-3 Bill Form / HCFA 1500 Form	12/19/2017	72148	\$ 912.00
50	0572061550101018	ECLIPSE MEDICAL IMAGING PC	2/26/2018	NF-3 Bill Form / HCFA 1500 Form	1/12/2018	72040	\$ 96.27
51	0572061550101018	ECLIPSE MEDICAL IMAGING PC	2/26/2018	NF-3 Bill Form / HCFA 1500 Form	1/12/2018	73030	\$ 71.02
52	0572061550101018	ECLIPSE MEDICAL IMAGING PC	2/26/2018	NF-3 Bill Form / HCFA 1500 Form	1/12/2018	73120	\$ 47.61
53	0572061550101018	ECLIPSE MEDICAL IMAGING PC	2/26/2018	NF-3 Bill Form / HCFA 1500 Form	1/12/2018	72100	\$ 65.86
54	0332831060101067	ECLIPSE MEDICAL IMAGING PC	3/12/2018	NF-3 Bill Form / HCFA 1500 Form	1/22/2018	72141	\$ 879.73
55	0572061550101018	ECLIPSE MEDICAL IMAGING PC	3/19/2018	NF-3 Bill Form / HCFA 1500 Form	2/5/2018	72141	\$ 659.79
56	0572061550101018	ECLIPSE MEDICAL IMAGING PC	3/19/2018	NF-3 Bill Form / HCFA 1500 Form	2/5/2018	72148	\$ 912.00
57	0266362910101073	ECLIPSE MEDICAL IMAGING PC	3/29/2018	NF-3 Bill Form / HCFA 1500 Form	2/12/2018	73221	\$ 878.67
58	0302513040101062	ECLIPSE MEDICAL IMAGING PC	4/2/2018	NF-3 Bill Form / HCFA 1500 Form	2/18/2018	73221	\$ 878.67
59	0266362910101073	ECLIPSE MEDICAL IMAGING PC	4/2/2018	NF-3 Bill Form / HCFA 1500 Form	2/19/2018	73721	\$ 878.67
60	0302513040101062	ECLIPSE MEDICAL IMAGING PC	4/2/2018	NF-3 Bill Form / HCFA 1500 Form	2/13/2018	73721	\$ 878.67
61	0302513040101062	ECLIPSE MEDICAL IMAGING PC	4/9/2018	NF-3 Bill Form / HCFA 1500 Form	2/22/2018	73221	\$ 878.67
62	0302513040101062	ECLIPSE MEDICAL IMAGING PC	4/12/2018	NF-3 Bill Form / HCFA 1500 Form	2/28/2018	72141	\$ 659.79
63	0302513040101062	ECLIPSE MEDICAL IMAGING PC	4/12/2018	NF-3 Bill Form / HCFA 1500 Form	2/28/2018	72148	\$ 912.00
64	0302513040101062	ECLIPSE MEDICAL IMAGING PC	4/19/2018	NF-3 Bill Form / HCFA 1500 Form	3/5/2018	72148	\$ 912.00
65	0302513040101062	ECLIPSE MEDICAL IMAGING PC	4/19/2018	NF-3 Bill Form / HCFA 1500 Form	3/5/2018	72141	\$ 659.79
66	0091663400101064	ECLIPSE MEDICAL IMAGING PC	4/20/2018	NF-3 Bill Form / HCFA 1500 Form	3/7/2018	73721	\$ 878.67
67	0606381490101013	ECLIPSE MEDICAL IMAGING PC	4/23/2018	NF-3 Bill Form / HCFA 1500 Form	3/9/2018	73221	\$ 878.67
68	0606381490101013	ECLIPSE MEDICAL IMAGING PC	4/23/2018	NF-3 Bill Form / HCFA 1500 Form	3/9/2018	73721	\$ 878.67
69	0091663400101064	ECLIPSE MEDICAL IMAGING PC	4/23/2018	NF-3 Bill Form / HCFA 1500 Form	3/9/2018	72148	\$ 912.00
70	0606381490101013	ECLIPSE MEDICAL IMAGING PC	4/26/2018	NF-3 Bill Form / HCFA 1500 Form	3/13/2018	72040	\$ 72.20

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RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
71	0606381490101013	ECLIPSE MEDICAL IMAGING PC	4/26/2018	NF-3 Bill Form / HCFA 1500 Form	3/13/2018	73030	\$ 71.02
72	0606381490101013	ECLIPSE MEDICAL IMAGING PC	4/26/2018	NF-3 Bill Form / HCFA 1500 Form	3/13/2018	73721	\$ 878.67
73	0606381490101013	ECLIPSE MEDICAL IMAGING PC	4/26/2018	NF-3 Bill Form / HCFA 1500 Form	3/13/2018	73560	\$ 55.54
74	0606381490101013	ECLIPSE MEDICAL IMAGING PC	4/26/2018	NF-3 Bill Form / HCFA 1500 Form	3/13/2018	72100	\$ 65.86
75	0606381490101013	ECLIPSE MEDICAL IMAGING PC	4/26/2018	NF-3 Bill Form / HCFA 1500 Form	3/13/2018	73560	\$ 55.54
76	0606381490101013	ECLIPSE MEDICAL IMAGING PC	4/26/2018	NF-3 Bill Form / HCFA 1500 Form	3/13/2018	72040	\$ 72.20
77	0606381490101013	ECLIPSE MEDICAL IMAGING PC	4/26/2018	NF-3 Bill Form / HCFA 1500 Form	3/13/2018	73560	\$ 55.54
78	0606381490101013	ECLIPSE MEDICAL IMAGING PC	4/26/2018	NF-3 Bill Form / HCFA 1500 Form	3/13/2018	73721	\$ 878.67
79	0606381490101013	ECLIPSE MEDICAL IMAGING PC	5/4/2018	NF-3 Bill Form / HCFA 1500 Form	3/20/2018	72125	\$ 581.90
80	0606381490101013	ECLIPSE MEDICAL IMAGING PC	5/4/2018	NF-3 Bill Form / HCFA 1500 Form	3/23/2018	72148	\$ 912.00
81	0511038260101037	ECLIPSE MEDICAL IMAGING PC	5/14/2018	NF-3 Bill Form / HCFA 1500 Form	4/2/2018	73721	\$ 659.00
82	0511038260101037	ECLIPSE MEDICAL IMAGING PC	5/14/2018	NF-3 Bill Form / HCFA 1500 Form	4/2/2018	73221	\$ 878.67
83	0511038260101037	ECLIPSE MEDICAL IMAGING PC	6/15/2018	NF-3 Bill Form / HCFA 1500 Form	5/2/2018	72141	\$ 879.73
84	0511038260101037	ECLIPSE MEDICAL IMAGING PC	6/15/2018	NF-3 Bill Form / HCFA 1500 Form	5/2/2018	73721	\$ 659.00
85	0266362910101073	ECLIPSE MEDICAL IMAGING PC	6/15/2018	NF-3 Bill Form / HCFA 1500 Form	5/1/2018	72141	\$ 879.73
86	0511038260101037	ECLIPSE MEDICAL IMAGING PC	6/28/2018	NF-3 Bill Form / HCFA 1500 Form	5/15/2018	73718	\$ 676.06
87	0511038260101037	ECLIPSE MEDICAL IMAGING PC	6/28/2018	NF-3 Bill Form / HCFA 1500 Form	5/15/2018	72148	\$ 912.00
88	0266362910101073	ECLIPSE MEDICAL IMAGING PC	7/6/2018	NF-3 Bill Form / HCFA 1500 Form	5/24/2018	72148	\$ 912.00
89	0135161310101074	ECLIPSE MEDICAL IMAGING PC	7/6/2018	NF-3 Bill Form / HCFA 1500 Form	5/23/2018	72100	\$ 65.86
90	0135161310101074	ECLIPSE MEDICAL IMAGING PC	7/6/2018	NF-3 Bill Form / HCFA 1500 Form	5/23/2018	72148	\$ 912.00
91	0624857870101010	ECLIPSE MEDICAL IMAGING PC	7/16/2018	NF-3 Bill Form / HCFA 1500 Form	6/6/2018	73721	\$ 878.67
92	0632335210101016	ECLIPSE MEDICAL IMAGING PC	9/14/2018	NF-3 Bill Form / HCFA 1500 Form	8/1/2018	73721	\$ 878.67
93	0629919580101014	ECLIPSE MEDICAL IMAGING PC	9/17/2018	NF-3 Bill Form / HCFA 1500 Form	8/5/2018	73221	\$ 878.67
94	0629919580101014	ECLIPSE MEDICAL IMAGING PC	9/27/2018	NF-3 Bill Form / HCFA 1500 Form	8/19/2018	72148	\$ 912.00
95	0629919580101014	ECLIPSE MEDICAL IMAGING PC	9/27/2018	NF-3 Bill Form / HCFA 1500 Form	8/19/2018	72141	\$ 659.79
96	0584510740101029	ECLIPSE MEDICAL IMAGING PC	10/8/2018	NF-3 Bill Form / HCFA 1500 Form	8/28/2018	72070	\$ 69.82
97	0584510740101029	ECLIPSE MEDICAL IMAGING PC	10/8/2018	NF-3 Bill Form / HCFA 1500 Form	8/28/2018	72148	\$ 912.00
98	0584510740101029	ECLIPSE MEDICAL IMAGING PC	10/8/2018	NF-3 Bill Form / HCFA 1500 Form	8/28/2018	72141	\$ 659.79
99	0631582370101010	ECLIPSE MEDICAL IMAGING PC	10/9/2018	NF-3 Bill Form / HCFA 1500 Form	8/29/2018	70551	\$ 874.44
100	0631582370101010	ECLIPSE MEDICAL IMAGING PC	10/15/2018	NF-3 Bill Form / HCFA 1500 Form	9/2/2018	73721	\$ 878.67
101	0580617370101023	ECLIPSE MEDICAL IMAGING PC	10/15/2018	NF-3 Bill Form / HCFA 1500 Form	8/31/2018	72148	\$ 912.00
102	0580617370101023	ECLIPSE MEDICAL IMAGING PC	10/22/2018	NF-3 Bill Form / HCFA 1500 Form	9/7/2018	73560	\$ 74.06
103	0510222550101037	ECLIPSE MEDICAL IMAGING PC	11/8/2018	NF-3 Bill Form / HCFA 1500 Form	9/25/2018	73721	\$ 878.67
104	0631582370101010	ECLIPSE MEDICAL IMAGING PC	11/8/2018	NF-3 Bill Form / HCFA 1500 Form	9/26/2018	72141	\$ 659.79
105	0631582370101010	ECLIPSE MEDICAL IMAGING PC	11/8/2018	NF-3 Bill Form / HCFA 1500 Form	9/26/2018	72148	\$ 912.00
106	0631582370101010	ECLIPSE MEDICAL IMAGING PC	11/8/2018	NF-3 Bill Form / HCFA 1500 Form	9/25/2018	73718	\$ 901.42
107	0631582370101010	ECLIPSE MEDICAL IMAGING PC	11/8/2018	NF-3 Bill Form / HCFA 1500 Form	9/25/2018	72141	\$ 659.79
108	0631582370101010	ECLIPSE MEDICAL IMAGING PC	11/12/2018	NF-3 Bill Form / HCFA 1500 Form	9/27/2018	73721	\$ 878.67
109	0631582370101010	ECLIPSE MEDICAL IMAGING PC	11/12/2018	NF-3 Bill Form / HCFA 1500 Form	9/30/2018	72148	\$ 912.00
110	0631582370101010	ECLIPSE MEDICAL IMAGING PC	11/12/2018	NF-3 Bill Form / HCFA 1500 Form	9/30/2018	72141	\$ 659.79
111	0584510740101029	ECLIPSE MEDICAL IMAGING PC	11/15/2018	NF-3 Bill Form / HCFA 1500 Form	10/9/2018	20552	\$ 107.64
112	0584510740101029	ECLIPSE MEDICAL IMAGING PC	11/15/2018	NF-3 Bill Form / HCFA 1500 Form	10/9/2018	76942	\$ 262.91
113	0584510740101029	ECLIPSE MEDICAL IMAGING PC	11/15/2018	NF-3 Bill Form / HCFA 1500 Form	10/9/2018	96372	\$ 45.80
114	0584510740101029	ECLIPSE MEDICAL IMAGING PC	11/15/2018	NF-3 Bill Form / HCFA 1500 Form	10/9/2018	99242	\$ 236.94
115	0584510740101029	ECLIPSE MEDICAL IMAGING PC	11/15/2018	NF-3 Bill Form / HCFA 1500 Form	10/9/2018	C9290	\$ 15.00
116	0584510740101029	ECLIPSE MEDICAL IMAGING PC	11/15/2018	NF-3 Bill Form / HCFA 1500 Form	10/9/2018	J1100	\$ 15.00
117	0584510740101029	ECLIPSE MEDICAL IMAGING PC	11/15/2018	NF-3 Bill Form / HCFA 1500 Form	10/9/2018	J2001	\$ 15.00
118	0631582370101010	ECLIPSE MEDICAL IMAGING PC	11/16/2018	NF-3 Bill Form / HCFA 1500 Form	10/1/2018	72146	\$ 959.61
119	0631582370101010	ECLIPSE MEDICAL IMAGING PC	11/16/2018	NF-3 Bill Form / HCFA 1500 Form	10/2/2018	72148	\$ 912.00
120	0561797240101016	ECLIPSE MEDICAL IMAGING PC	11/16/2018	NF-3 Bill Form / HCFA 1500 Form	10/2/2018	73221	\$ 878.67
121	0631582370101010	ECLIPSE MEDICAL IMAGING PC	11/19/2018	NF-3 Bill Form / HCFA 1500 Form	10/7/2018	72148	\$ 912.00
122	0580617370101023	ECLIPSE MEDICAL IMAGING PC	12/3/2018	NF-3 Bill Form / HCFA 1500 Form	10/19/2018	73721	\$ 878.67
123	0561797240101016	ECLIPSE MEDICAL IMAGING PC	12/3/2018	NF-3 Bill Form / HCFA 1500 Form	10/24/2018	72141	\$ 879.73
124	0621113900101015	ECLIPSE MEDICAL IMAGING PC	12/17/2018	NF-3 Bill Form / HCFA 1500 Form	11/5/2018	72148	\$ 912.00
125	0621113900101015	ECLIPSE MEDICAL IMAGING PC	12/26/2018	NF-3 Bill Form / HCFA 1500 Form	11/11/2018	72141	\$ 879.73
126	0621113900101015	ECLIPSE MEDICAL IMAGING PC	12/26/2018	NF-3 Bill Form / HCFA 1500 Form	11/11/2018	73221	\$ 659.00
127	0561797240101016	ECLIPSE MEDICAL IMAGING PC	12/27/2018	NF-3 Bill Form / HCFA 1500 Form	11/5/2018	72148	\$ 912.00
128	0598591940101013	ECLIPSE MEDICAL IMAGING PC	2/4/2019	NF-3 Bill Form / HCFA 1500 Form	12/21/2018	72148	\$ 912.00
129	0598591940101013	ECLIPSE MEDICAL IMAGING PC	2/4/2019	NF-3 Bill Form / HCFA 1500 Form	12/21/2018	72141	\$ 659.79
130	0400304080101068	ECLIPSE MEDICAL IMAGING PC	2/14/2019	NF-3 Bill Form / HCFA 1500 Form	1/4/2019	73721	\$ 878.67
131	0400304080101068	ECLIPSE MEDICAL IMAGING PC	2/14/2019	NF-3 Bill Form / HCFA 1500 Form	1/6/2019	73721	\$ 878.67
132	0546245170101036	ECLIPSE MEDICAL IMAGING PC	2/22/2019	NF-3 Bill Form / HCFA 1500 Form	1/11/2019	73221	\$ 659.00
133	0546245170101036	ECLIPSE MEDICAL IMAGING PC	2/22/2019	NF-3 Bill Form / HCFA 1500 Form	1/11/2019	73721	\$ 878.67
134	0546245170101036	ECLIPSE MEDICAL IMAGING PC	2/25/2019	NF-3 Bill Form / HCFA 1500 Form	1/14/2019	73721	\$ 878.67
135	0631582370101010	ECLIPSE MEDICAL IMAGING PC	2/25/2019	NF-3 Bill Form / HCFA 1500 Form	1/15/2019	72192	\$ 486.68
136	0546245170101036	ECLIPSE MEDICAL IMAGING PC	3/11/2019	NF-3 Bill Form / HCFA 1500 Form	1/18/2019	72148	\$ 912.00
137	0546245170101036	ECLIPSE MEDICAL IMAGING PC	3/11/2019	NF-3 Bill Form / HCFA 1500 Form	1/18/2019	72141	\$ 659.79
138	0498051660101017	ECLIPSE MEDICAL IMAGING PC	3/25/2019	NF-3 Bill Form / HCFA 1500 Form	2/14/2019	73221	\$ 878.67
139	0582861060101038	ECLIPSE MEDICAL IMAGING PC	3/26/2019	NF-3 Bill Form / HCFA 1500 Form	2/1/2019	72070	\$ 46.55
140	0582861060101038	ECLIPSE MEDICAL IMAGING PC	3/26/2019	NF-3 Bill Form / HCFA 1500 Form	2/1/2019	72040	\$ 96.27

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141	0498051660101017	ECLIPSE MEDICAL IMAGING PC	4/1/2019	NF-3 Bill Form / HCFA 1500 Form	2/19/2019	72148	\$ 912.00
142	0582861060101038	ECLIPSE MEDICAL IMAGING PC	4/8/2019	NF-3 Bill Form / HCFA 1500 Form	2/22/2019	72148	\$ 912.00
143	0582861060101038	ECLIPSE MEDICAL IMAGING PC	4/8/2019	NF-3 Bill Form / HCFA 1500 Form	2/22/2019	73221	\$ 659.00
144	0580296970101020	ECLIPSE MEDICAL IMAGING PC	4/9/2019	NF-3 Bill Form / HCFA 1500 Form	2/22/2019	73221	\$ 878.67
145	0580296970101020	ECLIPSE MEDICAL IMAGING PC	4/11/2019	NF-3 Bill Form / HCFA 1500 Form	2/25/2019	73721	\$ 878.67
146	0582861060101038	ECLIPSE MEDICAL IMAGING PC	4/11/2019	NF-3 Bill Form / HCFA 1500 Form	2/26/2019	72141	\$ 879.73
147	0580296970101020	ECLIPSE MEDICAL IMAGING PC	4/23/2019	NF-3 Bill Form / HCFA 1500 Form	3/8/2019	72141	\$ 659.79
148	0580296970101020	ECLIPSE MEDICAL IMAGING PC	4/23/2019	NF-3 Bill Form / HCFA 1500 Form	3/8/2019	72148	\$ 912.00
149	0580296970101020	ECLIPSE MEDICAL IMAGING PC	4/29/2019	NF-3 Bill Form / HCFA 1500 Form	3/14/2019	72141	\$ 659.79
150	0580296970101020	ECLIPSE MEDICAL IMAGING PC	4/29/2019	NF-3 Bill Form / HCFA 1500 Form	3/14/2019	72148	\$ 912.00
151	0563637420101089	ECLIPSE MEDICAL IMAGING PC	5/6/2019	NF-3 Bill Form / HCFA 1500 Form	3/24/2019	73721	\$ 878.67
152	0248965290101019	ECLIPSE MEDICAL IMAGING PC	5/20/2019	NF-3 Bill Form / HCFA 1500 Form	4/7/2019	72148	\$ 912.00
153	0248965290101019	ECLIPSE MEDICAL IMAGING PC	5/20/2019	NF-3 Bill Form / HCFA 1500 Form	4/7/2019	72141	\$ 659.79
154	0473890270101068	ECLIPSE MEDICAL IMAGING PC	7/1/2019	NF-3 Bill Form / HCFA 1500 Form	5/17/2019	73221	\$ 878.67
155	0473890270101068	ECLIPSE MEDICAL IMAGING PC	7/1/2019	NF-3 Bill Form / HCFA 1500 Form	5/17/2019	73721	\$ 659.00
156	0301936440101013	ECLIPSE MEDICAL IMAGING PC	7/5/2019	NF-3 Bill Form / HCFA 1500 Form	5/21/2019	73721	\$ 878.67
157	0563637420101089	ECLIPSE MEDICAL IMAGING PC	7/22/2019	NF-3 Bill Form / HCFA 1500 Form	6/6/2019	73221	\$ 878.67
158	0423360260101099	ECLIPSE MEDICAL IMAGING PC	8/12/2019	NF-3 Bill Form / HCFA 1500 Form	6/28/2019	73221	\$ 878.67
159	0506586930101016	ECLIPSE MEDICAL IMAGING PC	9/3/2019	NF-3 Bill Form / HCFA 1500 Form	7/21/2019	73221	\$ 659.00
160	0506586930101016	ECLIPSE MEDICAL IMAGING PC	9/3/2019	NF-3 Bill Form / HCFA 1500 Form	7/21/2019	73721	\$ 878.67
161	0483024540101108	ECLIPSE MEDICAL IMAGING PC	9/3/2019	NF-3 Bill Form / HCFA 1500 Form	7/21/2019	73221	\$ 659.00
162	0483024540101108	ECLIPSE MEDICAL IMAGING PC	9/3/2019	NF-3 Bill Form / HCFA 1500 Form	7/21/2019	73721	\$ 878.67
163	0529372810101035	ECLIPSE MEDICAL IMAGING PC	9/6/2019	NF-3 Bill Form / HCFA 1500 Form	1/18/2019	73721	\$ 878.67
164	0529372810101035	ECLIPSE MEDICAL IMAGING PC	9/6/2019	NF-3 Bill Form / HCFA 1500 Form	2/8/2019	72141	\$ 659.79
165	0529372810101035	ECLIPSE MEDICAL IMAGING PC	9/6/2019	NF-3 Bill Form / HCFA 1500 Form	2/8/2019	72148	\$ 912.00
166	0529372810101035	ECLIPSE MEDICAL IMAGING PC	9/6/2019	NF-3 Bill Form / HCFA 1500 Form	4/19/2019	73721	\$ 878.67
167	0506586930101016	ECLIPSE MEDICAL IMAGING PC	9/16/2019	NF-3 Bill Form / HCFA 1500 Form	8/4/2019	72141	\$ 659.79
168	0506586930101016	ECLIPSE MEDICAL IMAGING PC	9/16/2019	NF-3 Bill Form / HCFA 1500 Form	8/4/2019	72148	\$ 912.00
169	0482528510101030	ECLIPSE MEDICAL IMAGING PC	9/26/2019	NF-3 Bill Form / HCFA 1500 Form	8/13/2019	73721	\$ 878.67
170	0420752820101077	ECLIPSE MEDICAL IMAGING PC	10/7/2019	NF-3 Bill Form / HCFA 1500 Form	8/22/2019	70551	\$ 655.83
171	0420752820101077	ECLIPSE MEDICAL IMAGING PC	10/7/2019	NF-3 Bill Form / HCFA 1500 Form	8/22/2019	73660	\$ 44.43
172	0420752820101077	ECLIPSE MEDICAL IMAGING PC	10/7/2019	NF-3 Bill Form / HCFA 1500 Form	8/22/2019	72148	\$ 912.00
173	0420752820101077	ECLIPSE MEDICAL IMAGING PC	10/15/2019	NF-3 Bill Form / HCFA 1500 Form	9/3/2019	72141	\$ 879.73
174	0482528510101030	ECLIPSE MEDICAL IMAGING PC	10/15/2019	NF-3 Bill Form / HCFA 1500 Form	8/29/2019	72148	\$ 912.00
175	0576861960000001	ECLIPSE MEDICAL IMAGING PC	11/1/2019	NF-3 Bill Form / HCFA 1500 Form	9/18/2019	72040	\$ 72.20
176	0576861960000001	ECLIPSE MEDICAL IMAGING PC	11/1/2019	NF-3 Bill Form / HCFA 1500 Form	9/18/2019	72070	\$ 69.82
177	0576861960000001	ECLIPSE MEDICAL IMAGING PC	11/3/2019	NF-3 Bill Form / HCFA 1500 Form	9/18/2019	73221	\$ 878.67
178	0570727880101025	ECLIPSE MEDICAL IMAGING PC	11/4/2019	NF-3 Bill Form / HCFA 1500 Form	9/22/2019	70160	\$ 50.78
179	0570727880101025	ECLIPSE MEDICAL IMAGING PC	11/4/2019	NF-3 Bill Form / HCFA 1500 Form	9/22/2019	73721	\$ 659.00
180	0570727880101025	ECLIPSE MEDICAL IMAGING PC	11/4/2019	NF-3 Bill Form / HCFA 1500 Form	9/22/2019	72170	\$ 57.54
181	0570727880101025	ECLIPSE MEDICAL IMAGING PC	11/4/2019	NF-3 Bill Form / HCFA 1500 Form	9/22/2019	73718	\$ 901.42
182	0570727880101025	ECLIPSE MEDICAL IMAGING PC	11/4/2019	NF-3 Bill Form / HCFA 1500 Form	9/22/2019	70140	\$ 65.85
183	0301936440101013	ECLIPSE MEDICAL IMAGING PC	11/4/2019	NF-3 Bill Form / HCFA 1500 Form	9/22/2019	72148	\$ 912.00
184	0301936440101013	ECLIPSE MEDICAL IMAGING PC	11/4/2019	NF-3 Bill Form / HCFA 1500 Form	9/22/2019	72141	\$ 659.79
185	0548116820101049	ECLIPSE MEDICAL IMAGING PC	11/11/2019	NF-3 Bill Form / HCFA 1500 Form	9/26/2019	73721	\$ 878.67
186	0576861960000001	ECLIPSE MEDICAL IMAGING PC	11/11/2019	NF-3 Bill Form / HCFA 1500 Form	9/27/2019	73221	\$ 878.67
187	0576861960000001	ECLIPSE MEDICAL IMAGING PC	11/12/2019	NF-3 Bill Form / HCFA 1500 Form	10/1/2019	73221	\$ 878.67
188	0576861960000001	ECLIPSE MEDICAL IMAGING PC	11/21/2019	NF-3 Bill Form / HCFA 1500 Form	10/8/2019	72141	\$ 879.73
189	0124673250101033	ECLIPSE MEDICAL IMAGING PC	11/21/2019	NF-3 Bill Form / HCFA 1500 Form	8/12/2019	73721	\$ 878.67
190	0124673250101033	ECLIPSE MEDICAL IMAGING PC	11/21/2019	NF-3 Bill Form / HCFA 1500 Form	8/12/2019	71110	\$ 80.94
191	0124673250101033	ECLIPSE MEDICAL IMAGING PC	11/21/2019	NF-3 Bill Form / HCFA 1500 Form	8/12/2019	71120	\$ 58.71
192	0576861960000001	ECLIPSE MEDICAL IMAGING PC	11/29/2019	NF-3 Bill Form / HCFA 1500 Form	10/14/2019	72100	\$ 65.86
193	0576861960000001	ECLIPSE MEDICAL IMAGING PC	11/29/2019	NF-3 Bill Form / HCFA 1500 Form	10/14/2019	72148	\$ 912.00
194	0570727880101025	ECLIPSE MEDICAL IMAGING PC	12/10/2019	NF-3 Bill Form / HCFA 1500 Form	10/27/2019	70486	\$ 361.43
195	0570727880101025	ECLIPSE MEDICAL IMAGING PC	12/10/2019	NF-3 Bill Form / HCFA 1500 Form	10/27/2019	73721	\$ 878.67
196	0615823000101033	ECLIPSE MEDICAL IMAGING PC	12/24/2019	NF-3 Bill Form / HCFA 1500 Form	11/8/2019	70551	\$ 874.44
197	0615823000101033	ECLIPSE MEDICAL IMAGING PC	1/9/2020	NF-3 Bill Form / HCFA 1500 Form	11/25/2019	72141	\$ 659.79
198	0615823000101033	ECLIPSE MEDICAL IMAGING PC	1/9/2020	NF-3 Bill Form / HCFA 1500 Form	11/25/2019	72148	\$ 912.00
199	0615823000101033	ECLIPSE MEDICAL IMAGING PC	1/13/2020	NF-3 Bill Form / HCFA 1500 Form	11/27/2019	72146	\$ 959.61
200	0124673250101033	ECLIPSE MEDICAL IMAGING PC	1/20/2020	NF-3 Bill Form / HCFA 1500 Form	9/3/2019	72148	\$ 912.00
201	0124673250101033	ECLIPSE MEDICAL IMAGING PC	1/20/2020	NF-3 Bill Form / HCFA 1500 Form	9/3/2019	72141	\$ 659.79
202	0644839450000001	ECLIPSE MEDICAL IMAGING PC	1/9/2020	NF-3 Bill Form / HCFA 1500 Form	9/18/2019	72040	\$ 72.20
203	0644839450000001	ECLIPSE MEDICAL IMAGING PC	1/9/2020	NF-3 Bill Form / HCFA 1500 Form	9/18/2019	72070	\$ 69.82
204	0644839450000001	ECLIPSE MEDICAL IMAGING PC	1/9/2020	NF-3 Bill Form / HCFA 1500 Form	9/18/2019	73221	\$ 878.87
205	0644839450000001	ECLIPSE MEDICAL IMAGING PC	1/9/2020	NF-3 Bill Form / HCFA 1500 Form	10/8/2019	72141	\$ 879.73
206	0644839450000001	ECLIPSE MEDICAL IMAGING PC	1/9/2020	NF-3 Bill Form / HCFA 1500 Form	10/14/2019	72100	\$ 65.88
207	0644839450000001	ECLIPSE MEDICAL IMAGING PC	1/9/2020	NF-3 Bill Form / HCFA 1500 Form	10/14/2019	72148	\$ 912.00
208	0661797880101011	ECLIPSE MEDICAL IMAGING PC	1/29/2020	NF-3 Bill Form / HCFA 1500 Form	12/15/2019	73221	\$ 878.67
209	0499275040101088	ECLIPSE MEDICAL IMAGING PC	2/18/2020	NF-3 Bill Form / HCFA 1500 Form	1/6/2020	72141	\$ 879.73
210	0499275040101088	ECLIPSE MEDICAL IMAGING PC	2/18/2020	NF-3 Bill Form / HCFA 1500 Form	1/2/2020	73221	\$ 659.00

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Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
211	0499275040101088	ECLIPSE MEDICAL IMAGING PC	2/18/2020	NF-3 Bill Form / HCFA 1500 Form	1/2/2020	72148	\$ 912.00
212	0576861960000001	ECLIPSE MEDICAL IMAGING PC	2/25/2020	NF-3 Bill Form / HCFA 1500 Form	10/8/2019	72148	\$ 912.00
213	0576861960000001	ECLIPSE MEDICAL IMAGING PC	2/25/2020	NF-3 Bill Form / HCFA 1500 Form	10/8/2019	72141	\$ 659.79
214	0566287320101024	ECLIPSE MEDICAL IMAGING PC	4/1/2019	NF-3 Bill Form / HCFA 1500 Form	2/18/2019	73221	\$ 878.67
215	0588568190101010	ECLIPSE MEDICAL IMAGING PC	4/1/2019	NF-3 Bill Form / HCFA 1500 Form	2/17/2019	73221	\$ 659.00
216	0588568190101010	ECLIPSE MEDICAL IMAGING PC	4/1/2019	NF-3 Bill Form / HCFA 1500 Form	2/17/2019	73721	\$ 878.67
217	0143542300101044	ECLIPSE MEDICAL IMAGING PC	4/1/2019	NF-3 Bill Form / HCFA 1500 Form	2/17/2019	73721	\$ 659.00
218	0143542300101044	ECLIPSE MEDICAL IMAGING PC	4/1/2019	NF-3 Bill Form / HCFA 1500 Form	2/17/2019	72148	\$ 912.00
219	0643110360101018	ECLIPSE MEDICAL IMAGING PC	4/1/2019	NF-3 Bill Form / HCFA 1500 Form	2/15/2019	73721	\$ 878.67
220	0430190590101092	ECLIPSE MEDICAL IMAGING PC	4/1/2019	NF-3 Bill Form / HCFA 1500 Form	2/15/2019	72148	\$ 912.00
221	0526551260101024	ECLIPSE MEDICAL IMAGING PC	4/1/2019	NF-3 Bill Form / HCFA 1500 Form	2/18/2019	73221	\$ 878.67
222	0454791960101041	ECLIPSE MEDICAL IMAGING PC	4/1/2019	NF-3 Bill Form / HCFA 1500 Form	2/6/2019	73721	\$ 878.67
223	0389103310101012	ECLIPSE MEDICAL IMAGING PC	4/1/2019	NF-3 Bill Form / HCFA 1500 Form	2/18/2019	72148	\$ 912.00
224	0611621060101023	ECLIPSE MEDICAL IMAGING PC	4/2/2019	NF-3 Bill Form / HCFA 1500 Form	2/19/2019	73721	\$ 878.67
225	0147527770101273	ECLIPSE MEDICAL IMAGING PC	4/2/2019	NF-3 Bill Form / HCFA 1500 Form	2/19/2019	72141	\$ 879.73
226	0524252050101025	ECLIPSE MEDICAL IMAGING PC	4/5/2019	NF-3 Bill Form / HCFA 1500 Form	2/8/2019	73721	\$ 659.00
227	0524252050101025	ECLIPSE MEDICAL IMAGING PC	4/5/2019	NF-3 Bill Form / HCFA 1500 Form	2/8/2019	73510	\$ 62.68
228	0524252050101025	ECLIPSE MEDICAL IMAGING PC	4/5/2019	NF-3 Bill Form / HCFA 1500 Form	2/8/2019	73221	\$ 878.67
229	0506452280101017	ECLIPSE MEDICAL IMAGING PC	4/8/2019	NF-3 Bill Form / HCFA 1500 Form	2/21/2019	72141	\$ 659.79
230	0506452280101017	ECLIPSE MEDICAL IMAGING PC	4/8/2019	NF-3 Bill Form / HCFA 1500 Form	2/21/2019	72148	\$ 912.00
231	0434799500101038	ECLIPSE MEDICAL IMAGING PC	4/8/2019	NF-3 Bill Form / HCFA 1500 Form	2/20/2019	73221	\$ 878.67
232	0434799500101038	ECLIPSE MEDICAL IMAGING PC	4/8/2019	NF-3 Bill Form / HCFA 1500 Form	2/21/2019	73221	\$ 878.67
233	0170106510101040	ECLIPSE MEDICAL IMAGING PC	4/8/2019	NF-3 Bill Form / HCFA 1500 Form	2/21/2019	73200	\$ 486.68
234	0170106510101040	ECLIPSE MEDICAL IMAGING PC	4/8/2019	NF-3 Bill Form / HCFA 1500 Form	2/21/2019	73700	\$ 365.01
235	0177249810101063	ECLIPSE MEDICAL IMAGING PC	4/8/2019	NF-3 Bill Form / HCFA 1500 Form	2/22/2019	72141	\$ 879.73
236	0526551260101024	ECLIPSE MEDICAL IMAGING PC	4/8/2019	NF-3 Bill Form / HCFA 1500 Form	2/21/2019	72141	\$ 879.73
237	0485999620101029	ECLIPSE MEDICAL IMAGING PC	4/8/2019	NF-3 Bill Form / HCFA 1500 Form	2/22/2019	72148	\$ 912.00
238	0504915480101096	ECLIPSE MEDICAL IMAGING PC	4/8/2019	NF-3 Bill Form / HCFA 1500 Form	2/22/2019	73721	\$ 659.00
239	0504915480101096	ECLIPSE MEDICAL IMAGING PC	4/8/2019	NF-3 Bill Form / HCFA 1500 Form	2/22/2019	72148	\$ 912.00
240	0504915480101096	ECLIPSE MEDICAL IMAGING PC	4/8/2019	NF-3 Bill Form / HCFA 1500 Form	2/24/2019	72148	\$ 912.00
241	0504915480101096	ECLIPSE MEDICAL IMAGING PC	4/8/2019	NF-3 Bill Form / HCFA 1500 Form	2/24/2019	72141	\$ 659.79
242	0611621060101023	ECLIPSE MEDICAL IMAGING PC	4/9/2019	NF-3 Bill Form / HCFA 1500 Form	2/22/2019	73721	\$ 878.67
243	0526551260101024	ECLIPSE MEDICAL IMAGING PC	4/11/2019	NF-3 Bill Form / HCFA 1500 Form	2/13/2019	72148	\$ 912.00
244	0553741590101010	ECLIPSE MEDICAL IMAGING PC	4/11/2019	NF-3 Bill Form / HCFA 1500 Form	2/26/2019	72148	\$ 912.00
245	0553741590101010	ECLIPSE MEDICAL IMAGING PC	4/11/2019	NF-3 Bill Form / HCFA 1500 Form	2/26/2019	72125	\$ 436.42
246	0308342580101017	ECLIPSE MEDICAL IMAGING PC	4/11/2019	NF-3 Bill Form / HCFA 1500 Form	2/26/2019	72148	\$ 912.00
247	0401511360101092	ECLIPSE MEDICAL IMAGING PC	4/11/2019	NF-3 Bill Form / HCFA 1500 Form	2/26/2019	73721	\$ 878.67
248	0647006350101024	ECLIPSE MEDICAL IMAGING PC	4/11/2019	NF-3 Bill Form / HCFA 1500 Form	2/14/2019	72148	\$ 912.00
249	0468400200101027	ECLIPSE MEDICAL IMAGING PC	4/11/2019	NF-3 Bill Form / HCFA 1500 Form	2/27/2019	72141	\$ 659.79
250	0468400200101027	ECLIPSE MEDICAL IMAGING PC	4/11/2019	NF-3 Bill Form / HCFA 1500 Form	2/27/2019	72148	\$ 912.00
251	0485999620101029	ECLIPSE MEDICAL IMAGING PC	4/11/2019	NF-3 Bill Form / HCFA 1500 Form	2/26/2019	72141	\$ 879.73
252	0393040580101013	ECLIPSE MEDICAL IMAGING PC	4/11/2019	NF-3 Bill Form / HCFA 1500 Form	2/27/2019	72148	\$ 912.00
253	0454791960101041	ECLIPSE MEDICAL IMAGING PC	4/11/2019	NF-3 Bill Form / HCFA 1500 Form	2/25/2019	72148	\$ 912.00
254	0454791960101041	ECLIPSE MEDICAL IMAGING PC	4/11/2019	NF-3 Bill Form / HCFA 1500 Form	2/25/2019	72141	\$ 659.79
255	0308342580101017	ECLIPSE MEDICAL IMAGING PC	4/11/2019	NF-3 Bill Form / HCFA 1500 Form	2/26/2019	72125	\$ 581.90
256	0183557240101087	ECLIPSE MEDICAL IMAGING PC	4/11/2019	NF-3 Bill Form / HCFA 1500 Form	2/27/2019	73221	\$ 878.67
257	0629504870101021	ECLIPSE MEDICAL IMAGING PC	4/11/2019	NF-3 Bill Form / HCFA 1500 Form	2/26/2019	72100	\$ 65.86
258	0629504870101021	ECLIPSE MEDICAL IMAGING PC	4/11/2019	NF-3 Bill Form / HCFA 1500 Form	2/26/2019	72040	\$ 96.27
259	0645411860101013	ECLIPSE MEDICAL IMAGING PC	4/15/2019	NF-3 Bill Form / HCFA 1500 Form	3/4/2019	70551	\$ 874.44
260	0566287320101024	ECLIPSE MEDICAL IMAGING PC	4/15/2019	NF-3 Bill Form / HCFA 1500 Form	2/28/2019	72148	\$ 912.00
261	0566287320101024	ECLIPSE MEDICAL IMAGING PC	4/15/2019	NF-3 Bill Form / HCFA 1500 Form	2/28/2019	72141	\$ 659.79
262	0559832810101015	ECLIPSE MEDICAL IMAGING PC	4/15/2019	NF-3 Bill Form / HCFA 1500 Form	3/1/2019	73721	\$ 878.67
263	0434799500101038	ECLIPSE MEDICAL IMAGING PC	4/15/2019	NF-3 Bill Form / HCFA 1500 Form	3/3/2019	72141	\$ 879.73
264	0624542060101018	ECLIPSE MEDICAL IMAGING PC	4/15/2019	NF-3 Bill Form / HCFA 1500 Form	2/28/2019	73221	\$ 878.67
265	0646943740101010	ECLIPSE MEDICAL IMAGING PC	4/15/2019	NF-3 Bill Form / HCFA 1500 Form	2/28/2019	73700	\$ 486.68
266	0434799500101038	ECLIPSE MEDICAL IMAGING PC	4/15/2019	NF-3 Bill Form / HCFA 1500 Form	3/3/2019	72148	\$ 912.00
267	0548139490101024	ECLIPSE MEDICAL IMAGING PC	4/15/2019	NF-3 Bill Form / HCFA 1500 Form	3/1/2019	73221	\$ 878.67
268	0645411860101013	ECLIPSE MEDICAL IMAGING PC	4/15/2019	NF-3 Bill Form / HCFA 1500 Form	3/4/2019	73221	\$ 878.67
269	0102672580101023	ECLIPSE MEDICAL IMAGING PC	4/15/2019	NF-3 Bill Form / HCFA 1500 Form	3/3/2019	73718	\$ 901.42
270	0208026180101144	ECLIPSE MEDICAL IMAGING PC	4/15/2019	NF-3 Bill Form / HCFA 1500 Form	2/28/2019	72141	\$ 659.79
271	0208026180101144	ECLIPSE MEDICAL IMAGING PC	4/15/2019	NF-3 Bill Form / HCFA 1500 Form	2/28/2019	72148	\$ 912.00
272	0588568190101010	ECLIPSE MEDICAL IMAGING PC	4/15/2019	NF-3 Bill Form / HCFA 1500 Form	3/3/2019	72148	\$ 912.00
273	0588568190101010	ECLIPSE MEDICAL IMAGING PC	4/15/2019	NF-3 Bill Form / HCFA 1500 Form	3/3/2019	72141	\$ 659.79
274	0348477740101093	ECLIPSE MEDICAL IMAGING PC	4/15/2019	NF-3 Bill Form / HCFA 1500 Form	2/28/2019	73718	\$ 901.42
275	0597676630101042	ECLIPSE MEDICAL IMAGING PC	4/16/2019	NF-3 Bill Form / HCFA 1500 Form	3/1/2019	72141	\$ 659.79
276	0597676630101042	ECLIPSE MEDICAL IMAGING PC	4/16/2019	NF-3 Bill Form / HCFA 1500 Form	3/1/2019	72148	\$ 912.00
277	0568399430101055	ECLIPSE MEDICAL IMAGING PC	4/16/2019	NF-3 Bill Form / HCFA 1500 Form	3/1/2019	73721	\$ 878.67
278	0643027360101014	ECLIPSE MEDICAL IMAGING PC	4/16/2019	NF-3 Bill Form / HCFA 1500 Form	2/25/2019	73721	\$ 878.67
279	0611621060101023	ECLIPSE MEDICAL IMAGING PC	4/16/2019	NF-3 Bill Form / HCFA 1500 Form	3/4/2019	72148	\$ 912.00
280	0611621060101023	ECLIPSE MEDICAL IMAGING PC	4/16/2019	NF-3 Bill Form / HCFA 1500 Form	3/4/2019	72141	\$ 659.79

Government Employees Insurance Company, et al v. Eclipse Medical Imaging, et al
Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
281	0106995950101067	ECLIPSE MEDICAL IMAGING PC	4/16/2019	NF-3 Bill Form / HCFA 1500 Form	3/1/2019	73600	\$ 54.75
282	0106995950101067	ECLIPSE MEDICAL IMAGING PC	4/16/2019	NF-3 Bill Form / HCFA 1500 Form	3/1/2019	72100	\$ 65.86
283	0106995950101067	ECLIPSE MEDICAL IMAGING PC	4/16/2019	NF-3 Bill Form / HCFA 1500 Form	3/1/2019	73030	\$ 71.02
284	0106995950101067	ECLIPSE MEDICAL IMAGING PC	4/16/2019	NF-3 Bill Form / HCFA 1500 Form	3/1/2019	73560	\$ 55.54
285	0106995950101067	ECLIPSE MEDICAL IMAGING PC	4/16/2019	NF-3 Bill Form / HCFA 1500 Form	3/1/2019	72040	\$ 96.27
286	0106995950101067	ECLIPSE MEDICAL IMAGING PC	4/16/2019	NF-3 Bill Form / HCFA 1500 Form	3/1/2019	73100	\$ 46.42
287	0614273470101016	ECLIPSE MEDICAL IMAGING PC	4/19/2019	NF-3 Bill Form / HCFA 1500 Form	3/5/2019	73721	\$ 878.67
288	0576368760101027	ECLIPSE MEDICAL IMAGING PC	4/19/2019	NF-3 Bill Form / HCFA 1500 Form	3/5/2019	73721	\$ 878.67
289	0434799500101038	ECLIPSE MEDICAL IMAGING PC	4/19/2019	NF-3 Bill Form / HCFA 1500 Form	3/6/2019	73221	\$ 878.67
290	0416637520101160	ECLIPSE MEDICAL IMAGING PC	4/19/2019	NF-3 Bill Form / HCFA 1500 Form	3/6/2019	73721	\$ 878.67
291	0434799500101038	ECLIPSE MEDICAL IMAGING PC	4/19/2019	NF-3 Bill Form / HCFA 1500 Form	3/10/2019	72148	\$ 912.00
292	0646943740101010	ECLIPSE MEDICAL IMAGING PC	4/19/2019	NF-3 Bill Form / HCFA 1500 Form	3/5/2019	73700	\$ 486.68
293	0563130880101021	ECLIPSE MEDICAL IMAGING PC	4/19/2019	NF-3 Bill Form / HCFA 1500 Form	3/8/2019	72148	\$ 912.00
294	0313860760101047	ECLIPSE MEDICAL IMAGING PC	4/19/2019	NF-3 Bill Form / HCFA 1500 Form	3/5/2019	72148	\$ 912.00
295	0313860760101047	ECLIPSE MEDICAL IMAGING PC	4/19/2019	NF-3 Bill Form / HCFA 1500 Form	3/5/2019	72141	\$ 659.79
296	0308342580101017	ECLIPSE MEDICAL IMAGING PC	4/19/2019	NF-3 Bill Form / HCFA 1500 Form	3/5/2019	72131	\$ 581.90
297	0328581290101066	ECLIPSE MEDICAL IMAGING PC	4/19/2019	NF-3 Bill Form / HCFA 1500 Form	3/6/2019	73721	\$ 878.67
298	0448671030101024	ECLIPSE MEDICAL IMAGING PC	4/19/2019	NF-3 Bill Form / HCFA 1500 Form	3/6/2019	72141	\$ 879.73
299	0448671030101024	ECLIPSE MEDICAL IMAGING PC	4/19/2019	NF-3 Bill Form / HCFA 1500 Form	3/6/2019	73721	\$ 659.00
300	0611621060101023	ECLIPSE MEDICAL IMAGING PC	4/19/2019	NF-3 Bill Form / HCFA 1500 Form	3/7/2019	72148	\$ 912.00
301	0611621060101023	ECLIPSE MEDICAL IMAGING PC	4/19/2019	NF-3 Bill Form / HCFA 1500 Form	3/7/2019	72141	\$ 659.79
302	0645411860101013	ECLIPSE MEDICAL IMAGING PC	4/19/2019	NF-3 Bill Form / HCFA 1500 Form	3/7/2019	72100	\$ 87.81
303	0645411860101013	ECLIPSE MEDICAL IMAGING PC	4/19/2019	NF-3 Bill Form / HCFA 1500 Form	3/7/2019	73120	\$ 47.61
304	0177249810101063	ECLIPSE MEDICAL IMAGING PC	4/19/2019	NF-3 Bill Form / HCFA 1500 Form	3/5/2019	72148	\$ 912.00
305	0106995950101067	ECLIPSE MEDICAL IMAGING PC	4/22/2019	NF-3 Bill Form / HCFA 1500 Form	3/11/2019	73221	\$ 878.67
306	0645411860101013	ECLIPSE MEDICAL IMAGING PC	4/19/2019	NF-3 Bill Form / HCFA 1500 Form	3/10/2019	73721	\$ 878.67
307	0434799500101038	ECLIPSE MEDICAL IMAGING PC	4/22/2019	NF-3 Bill Form / HCFA 1500 Form	3/10/2019	72141	\$ 879.73
308	0448671030101024	ECLIPSE MEDICAL IMAGING PC	4/22/2019	NF-3 Bill Form / HCFA 1500 Form	3/8/2019	72148	\$ 912.00
309	0581654430101015	ECLIPSE MEDICAL IMAGING PC	4/22/2019	NF-3 Bill Form / HCFA 1500 Form	3/11/2019	73721	\$ 878.67
310	0590515690101020	ECLIPSE MEDICAL IMAGING PC	12/10/2018	NF-3 Bill Form / HCFA 1500 Form	7/18/2018	73721	\$ 878.67
311	0183557240101087	ECLIPSE MEDICAL IMAGING PC	4/25/2019	NF-3 Bill Form / HCFA 1500 Form	3/13/2019	72148	\$ 912.00
312	0183557240101087	ECLIPSE MEDICAL IMAGING PC	4/25/2019	NF-3 Bill Form / HCFA 1500 Form	3/13/2019	72141	\$ 659.79
313	0645411860101013	ECLIPSE MEDICAL IMAGING PC	4/25/2019	NF-3 Bill Form / HCFA 1500 Form	3/12/2019	73721	\$ 878.67
314	0468400200101027	ECLIPSE MEDICAL IMAGING PC	4/25/2019	NF-3 Bill Form / HCFA 1500 Form	3/12/2019	73721	\$ 878.67
315	0606545780101012	ECLIPSE MEDICAL IMAGING PC	4/25/2019	NF-3 Bill Form / HCFA 1500 Form	3/12/2019	73721	\$ 878.67
316	0328581290101066	ECLIPSE MEDICAL IMAGING PC	4/25/2019	NF-3 Bill Form / HCFA 1500 Form	3/13/2019	73221	\$ 659.00
317	0328581290101066	ECLIPSE MEDICAL IMAGING PC	4/25/2019	NF-3 Bill Form / HCFA 1500 Form	3/13/2019	73721	\$ 878.67
318	0606545780101012	ECLIPSE MEDICAL IMAGING PC	4/25/2019	NF-3 Bill Form / HCFA 1500 Form	3/13/2019	72141	\$ 659.79
319	0606545780101012	ECLIPSE MEDICAL IMAGING PC	4/25/2019	NF-3 Bill Form / HCFA 1500 Form	3/13/2019	72148	\$ 912.00
320	0465750830101042	ECLIPSE MEDICAL IMAGING PC	4/25/2019	NF-3 Bill Form / HCFA 1500 Form	3/13/2019	72148	\$ 912.00
321	0548139490101024	ECLIPSE MEDICAL IMAGING PC	4/25/2019	NF-3 Bill Form / HCFA 1500 Form	3/12/2019	72148	\$ 912.00
322	0124225860101033	ECLIPSE MEDICAL IMAGING PC	4/25/2019	NF-3 Bill Form / HCFA 1500 Form	3/12/2019	72148	\$ 912.00
323	0395121690101057	ECLIPSE MEDICAL IMAGING PC	4/25/2019	NF-3 Bill Form / HCFA 1500 Form	3/12/2019	72141	\$ 659.79
324	0395121690101057	ECLIPSE MEDICAL IMAGING PC	4/25/2019	NF-3 Bill Form / HCFA 1500 Form	3/12/2019	72148	\$ 912.00
325	0623474670101048	ECLIPSE MEDICAL IMAGING PC	4/29/2019	NF-3 Bill Form / HCFA 1500 Form	3/14/2019	73721	\$ 878.67
326	0546959570101012	ECLIPSE MEDICAL IMAGING PC	4/29/2019	NF-3 Bill Form / HCFA 1500 Form	3/17/2019	73721	\$ 659.00
327	0546959570101012	ECLIPSE MEDICAL IMAGING PC	4/29/2019	NF-3 Bill Form / HCFA 1500 Form	3/17/2019	72141	\$ 879.73
328	0528765390101021	ECLIPSE MEDICAL IMAGING PC	4/29/2019	NF-3 Bill Form / HCFA 1500 Form	3/14/2019	73721	\$ 878.67
329	051975920101021	ECLIPSE MEDICAL IMAGING PC	4/29/2019	NF-3 Bill Form / HCFA 1500 Form	3/15/2019	72141	\$ 879.73
330	0653784720101020	ECLIPSE MEDICAL IMAGING PC	4/29/2019	NF-3 Bill Form / HCFA 1500 Form	3/15/2019	73221	\$ 659.00
331	0653784720101020	ECLIPSE MEDICAL IMAGING PC	4/29/2019	NF-3 Bill Form / HCFA 1500 Form	3/15/2019	73718	\$ 901.42
332	0576368760101027	ECLIPSE MEDICAL IMAGING PC	4/29/2019	NF-3 Bill Form / HCFA 1500 Form	3/15/2019	72148	\$ 912.00
333	0576368760101027	ECLIPSE MEDICAL IMAGING PC	4/29/2019	NF-3 Bill Form / HCFA 1500 Form	3/15/2019	72141	\$ 659.79
334	0511054640101092	ECLIPSE MEDICAL IMAGING PC	4/30/2019	NF-3 Bill Form / HCFA 1500 Form	3/12/2019	73721	\$ 878.67
335	0328581290101066	ECLIPSE MEDICAL IMAGING PC	5/2/2019	NF-3 Bill Form / HCFA 1500 Form	3/19/2019	72141	\$ 659.79
336	0328581290101066	ECLIPSE MEDICAL IMAGING PC	5/2/2019	NF-3 Bill Form / HCFA 1500 Form	3/19/2019	72148	\$ 912.00
337	0434306780101058	ECLIPSE MEDICAL IMAGING PC	5/2/2019	NF-3 Bill Form / HCFA 1500 Form	3/19/2019	71020	\$ 78.29
338	0624542060101018	ECLIPSE MEDICAL IMAGING PC	5/2/2019	NF-3 Bill Form / HCFA 1500 Form	3/19/2019	72148	\$ 912.00
339	0624542060101018	ECLIPSE MEDICAL IMAGING PC	5/2/2019	NF-3 Bill Form / HCFA 1500 Form	3/19/2019	72141	\$ 659.79
340	0522274560101024	ECLIPSE MEDICAL IMAGING PC	5/2/2019	NF-3 Bill Form / HCFA 1500 Form	3/19/2019	72131	\$ 581.90
341	0522274560101024	ECLIPSE MEDICAL IMAGING PC	5/2/2019	NF-3 Bill Form / HCFA 1500 Form	3/19/2019	72126	\$ 436.42
342	0541158280101025	ECLIPSE MEDICAL IMAGING PC	5/6/2019	NF-3 Bill Form / HCFA 1500 Form	3/20/2019	72141	\$ 879.73
343	0541158280101025	ECLIPSE MEDICAL IMAGING PC	5/6/2019	NF-3 Bill Form / HCFA 1500 Form	3/20/2019	73721	\$ 659.00
344	0635893810101015	ECLIPSE MEDICAL IMAGING PC	5/6/2019	NF-3 Bill Form / HCFA 1500 Form	3/20/2019	73721	\$ 878.67
345	0622474670101018	ECLIPSE MEDICAL IMAGING PC	5/6/2019	NF-3 Bill Form / HCFA 1500 Form	1/14/2019	73721	\$ 878.67
346	0622474670101018	ECLIPSE MEDICAL IMAGING PC	5/6/2019	NF-3 Bill Form / HCFA 1500 Form	1/14/2019	73721	\$ 878.67
347	0416637520101152	ECLIPSE MEDICAL IMAGING PC	5/6/2019	NF-3 Bill Form / HCFA 1500 Form	2/6/2019	73221	\$ 878.67
348	0622474670101018	ECLIPSE MEDICAL IMAGING PC	5/6/2019	NF-3 Bill Form / HCFA 1500 Form	12/13/2018	73721	\$ 878.67
349	0528765390101021	ECLIPSE MEDICAL IMAGING PC	5/6/2019	NF-3 Bill Form / HCFA 1500 Form	3/21/2019	73221	\$ 878.67
350	0546959570101012	ECLIPSE MEDICAL IMAGING PC	5/6/2019	NF-3 Bill Form / HCFA 1500 Form	3/21/2019	72148	\$ 912.00

Government Employees Insurance Company, et al v. Eclipse Medical Imaging, et al
Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
351	0546959570101012	ECLIPSE MEDICAL IMAGING PC	5/6/2019	NF-3 Bill Form / HCFA 1500 Form	3/21/2019	70450	\$ 341.60
352	0454791960101041	ECLIPSE MEDICAL IMAGING PC	5/6/2019	NF-3 Bill Form / HCFA 1500 Form	3/21/2019	73721	\$ 878.67
353	0543702710101028	ECLIPSE MEDICAL IMAGING PC	5/6/2019	NF-3 Bill Form / HCFA 1500 Form	3/24/2019	73221	\$ 878.67
354	0222296940101021	ECLIPSE MEDICAL IMAGING PC	5/6/2019	NF-3 Bill Form / HCFA 1500 Form	3/21/2019	73221	\$ 878.67
355	0616391280101014	ECLIPSE MEDICAL IMAGING PC	5/6/2019	NF-3 Bill Form / HCFA 1500 Form	3/21/2019	72141	\$ 879.73
356	0624153510101010	ECLIPSE MEDICAL IMAGING PC	5/6/2019	NF-3 Bill Form / HCFA 1500 Form	3/20/2019	73718	\$ 901.42
357	0624153510101010	ECLIPSE MEDICAL IMAGING PC	5/6/2019	NF-3 Bill Form / HCFA 1500 Form	3/20/2019	73221	\$ 659.00
358	0624153510101010	ECLIPSE MEDICAL IMAGING PC	5/6/2019	NF-3 Bill Form / HCFA 1500 Form	3/20/2019	73100	\$ 46.42
359	0624153510101010	ECLIPSE MEDICAL IMAGING PC	5/6/2019	NF-3 Bill Form / HCFA 1500 Form	3/20/2019	73660	\$ 44.43
360	0624153510101010	ECLIPSE MEDICAL IMAGING PC	5/6/2019	NF-3 Bill Form / HCFA 1500 Form	3/20/2019	73620	\$ 56.73
361	0639907870101016	ECLIPSE MEDICAL IMAGING PC	5/9/2019	NF-3 Bill Form / HCFA 1500 Form	3/26/2019	72141	\$ 879.73
362	0558993180101018	ECLIPSE MEDICAL IMAGING PC	5/10/2019	NF-3 Bill Form / HCFA 1500 Form	3/25/2019	73721	\$ 878.67
363	0605628320101030	ECLIPSE MEDICAL IMAGING PC	5/13/2019	NF-3 Bill Form / HCFA 1500 Form	3/27/2019	72040	\$ 96.27
364	0541158280101025	ECLIPSE MEDICAL IMAGING PC	5/13/2019	NF-3 Bill Form / HCFA 1500 Form	3/27/2019	72148	\$ 912.00
365	0492393310101013	ECLIPSE MEDICAL IMAGING PC	5/13/2019	NF-3 Bill Form / HCFA 1500 Form	3/27/2019	72040	\$ 96.27
366	0492393310101013	ECLIPSE MEDICAL IMAGING PC	5/13/2019	NF-3 Bill Form / HCFA 1500 Form	3/27/2019	72100	\$ 65.86
367	0552872440101024	ECLIPSE MEDICAL IMAGING PC	5/13/2019	NF-3 Bill Form / HCFA 1500 Form	3/27/2019	72131	\$ 581.90
368	0567120420101033	ECLIPSE MEDICAL IMAGING PC	5/13/2019	NF-3 Bill Form / HCFA 1500 Form	3/28/2019	73221	\$ 878.67
369	0362232970101151	ECLIPSE MEDICAL IMAGING PC	5/13/2019	NF-3 Bill Form / HCFA 1500 Form	3/28/2019	73721	\$ 878.67
370	0287216210101230	ECLIPSE MEDICAL IMAGING PC	5/13/2019	NF-3 Bill Form / HCFA 1500 Form	3/28/2019	72148	\$ 912.00
371	0645411860101013	ECLIPSE MEDICAL IMAGING PC	5/14/2019	NF-3 Bill Form / HCFA 1500 Form	4/1/2019	73221	\$ 659.00
372	0645411860101013	ECLIPSE MEDICAL IMAGING PC	5/14/2019	NF-3 Bill Form / HCFA 1500 Form	4/1/2019	72148	\$ 912.00
373	0605628320101030	ECLIPSE MEDICAL IMAGING PC	5/14/2019	NF-3 Bill Form / HCFA 1500 Form	3/29/2019	73221	\$ 878.67
374	0645411860101013	ECLIPSE MEDICAL IMAGING PC	5/14/2019	NF-3 Bill Form / HCFA 1500 Form	3/31/2019	72141	\$ 659.79
375	0645411860101013	ECLIPSE MEDICAL IMAGING PC	5/14/2019	NF-3 Bill Form / HCFA 1500 Form	3/31/2019	72148	\$ 912.00
376	0568399430101055	ECLIPSE MEDICAL IMAGING PC	5/14/2019	NF-3 Bill Form / HCFA 1500 Form	3/27/2019	72148	\$ 912.00
377	0568399430101055	ECLIPSE MEDICAL IMAGING PC	5/14/2019	NF-3 Bill Form / HCFA 1500 Form	3/27/2019	72141	\$ 659.79
378	0563067220101123	ECLIPSE MEDICAL IMAGING PC	5/14/2019	NF-3 Bill Form / HCFA 1500 Form	3/27/2019	73721	\$ 878.67
379	0563067220101123	ECLIPSE MEDICAL IMAGING PC	5/14/2019	NF-3 Bill Form / HCFA 1500 Form	3/27/2019	73221	\$ 659.00
380	0106995950101067	ECLIPSE MEDICAL IMAGING PC	5/14/2019	NF-3 Bill Form / HCFA 1500 Form	4/1/2019	72148	\$ 912.00
381	0509356670101064	ECLIPSE MEDICAL IMAGING PC	5/14/2019	NF-3 Bill Form / HCFA 1500 Form	3/29/2019	70551	\$ 874.44
382	0632432420101017	ECLIPSE MEDICAL IMAGING PC	5/14/2019	NF-3 Bill Form / HCFA 1500 Form	3/31/2019	73221	\$ 878.67
383	0639907870101016	ECLIPSE MEDICAL IMAGING PC	5/17/2019	NF-3 Bill Form / HCFA 1500 Form	4/3/2019	73221	\$ 659.00
384	0639907870101016	ECLIPSE MEDICAL IMAGING PC	5/17/2019	NF-3 Bill Form / HCFA 1500 Form	4/3/2019	72148	\$ 912.00
385	0586934750101018	ECLIPSE MEDICAL IMAGING PC	5/17/2019	NF-3 Bill Form / HCFA 1500 Form	4/2/2019	72141	\$ 659.79
386	0586934750101018	ECLIPSE MEDICAL IMAGING PC	5/17/2019	NF-3 Bill Form / HCFA 1500 Form	4/2/2019	72148	\$ 912.00
387	0605628320101030	ECLIPSE MEDICAL IMAGING PC	5/17/2019	NF-3 Bill Form / HCFA 1500 Form	4/3/2019	72141	\$ 879.73
388	0461749800101028	ECLIPSE MEDICAL IMAGING PC	5/17/2019	NF-3 Bill Form / HCFA 1500 Form	4/3/2019	73721	\$ 878.67
389	0463318340101035	ECLIPSE MEDICAL IMAGING PC	5/20/2019	NF-3 Bill Form / HCFA 1500 Form	4/3/2019	73721	\$ 878.67
390	0551274170101020	ECLIPSE MEDICAL IMAGING PC	5/20/2019	NF-3 Bill Form / HCFA 1500 Form	4/4/2019	72148	\$ 912.00
391	0551274170101020	ECLIPSE MEDICAL IMAGING PC	5/20/2019	NF-3 Bill Form / HCFA 1500 Form	4/4/2019	72141	\$ 659.79
392	0509356670101064	ECLIPSE MEDICAL IMAGING PC	5/20/2019	NF-3 Bill Form / HCFA 1500 Form	4/3/2019	73221	\$ 878.67
393	0622972990101022	ECLIPSE MEDICAL IMAGING PC	5/20/2019	NF-3 Bill Form / HCFA 1500 Form	4/4/2019	73721	\$ 878.67
394	0393040580101013	ECLIPSE MEDICAL IMAGING PC	5/20/2019	NF-3 Bill Form / HCFA 1500 Form	4/4/2019	72141	\$ 879.73
395	0643110360101018	ECLIPSE MEDICAL IMAGING PC	5/20/2019	NF-3 Bill Form / HCFA 1500 Form	4/9/2019	73721	\$ 878.67
396	0496184070101020	ECLIPSE MEDICAL IMAGING PC	5/20/2019	NF-3 Bill Form / HCFA 1500 Form	4/5/2019	73721	\$ 878.67
397	0632432420101017	ECLIPSE MEDICAL IMAGING PC	5/20/2019	NF-3 Bill Form / HCFA 1500 Form	4/5/2019	72141	\$ 659.79
398	0632432420101017	ECLIPSE MEDICAL IMAGING PC	5/20/2019	NF-3 Bill Form / HCFA 1500 Form	4/5/2019	72148	\$ 912.00
399	0632432420101017	ECLIPSE MEDICAL IMAGING PC	5/20/2019	NF-3 Bill Form / HCFA 1500 Form	4/2/2019	72141	\$ 659.79
400	0632432420101017	ECLIPSE MEDICAL IMAGING PC	5/20/2019	NF-3 Bill Form / HCFA 1500 Form	4/2/2019	72148	\$ 912.00
401	0632432420101017	ECLIPSE MEDICAL IMAGING PC	5/20/2019	NF-3 Bill Form / HCFA 1500 Form	4/5/2019	72146	\$ 959.61
402	0559665790101047	ECLIPSE MEDICAL IMAGING PC	5/28/2019	NF-3 Bill Form / HCFA 1500 Form	4/17/2019	72141	\$ 879.73
403	0559665790101047	ECLIPSE MEDICAL IMAGING PC	5/28/2019	NF-3 Bill Form / HCFA 1500 Form	4/17/2019	72040	\$ 72.20
404	0622474670101018	ECLIPSE MEDICAL IMAGING PC	5/28/2019	NF-3 Bill Form / HCFA 1500 Form	4/11/2019	73721	\$ 878.67
405	0551644330101096	ECLIPSE MEDICAL IMAGING PC	5/28/2019	NF-3 Bill Form / HCFA 1500 Form	4/17/2019	73721	\$ 878.67
406	0605628320101030	ECLIPSE MEDICAL IMAGING PC	5/28/2019	NF-3 Bill Form / HCFA 1500 Form	4/12/2019	72148	\$ 912.00
407	0559665790101047	ECLIPSE MEDICAL IMAGING PC	5/28/2019	NF-3 Bill Form / HCFA 1500 Form	4/15/2019	73221	\$ 878.67
408	0492393310101013	ECLIPSE MEDICAL IMAGING PC	5/28/2019	NF-3 Bill Form / HCFA 1500 Form	4/17/2019	72141	\$ 659.79
409	0492393310101013	ECLIPSE MEDICAL IMAGING PC	5/28/2019	NF-3 Bill Form / HCFA 1500 Form	4/17/2019	72148	\$ 912.00
410	0612917010101025	ECLIPSE MEDICAL IMAGING PC	5/28/2019	NF-3 Bill Form / HCFA 1500 Form	4/17/2019	72146	\$ 959.61
411	0559665790101047	ECLIPSE MEDICAL IMAGING PC	5/28/2019	NF-3 Bill Form / HCFA 1500 Form	4/15/2019	72148	\$ 912.00
412	0559665790101047	ECLIPSE MEDICAL IMAGING PC	5/28/2019	NF-3 Bill Form / HCFA 1500 Form	4/15/2019	72141	\$ 659.79
413	0563067220101123	ECLIPSE MEDICAL IMAGING PC	5/28/2019	NF-3 Bill Form / HCFA 1500 Form	4/17/2019	72141	\$ 659.79
414	0563067220101123	ECLIPSE MEDICAL IMAGING PC	5/28/2019	NF-3 Bill Form / HCFA 1500 Form	4/17/2019	72148	\$ 912.00
415	051975920101021	ECLIPSE MEDICAL IMAGING PC	5/28/2019	NF-3 Bill Form / HCFA 1500 Form	4/14/2019	73221	\$ 878.67
416	0645411860101013	ECLIPSE MEDICAL IMAGING PC	5/29/2019	NF-3 Bill Form / HCFA 1500 Form	4/11/2019	72141	\$ 879.73
417	0567120420101033	ECLIPSE MEDICAL IMAGING PC	5/31/2019	NF-3 Bill Form / HCFA 1500 Form	4/19/2019	72141	\$ 879.73
418	0559665790101047	ECLIPSE MEDICAL IMAGING PC	6/3/2019	NF-3 Bill Form / HCFA 1500 Form	4/23/2019	72148	\$ 912.00
419	0152452020101126	ECLIPSE MEDICAL IMAGING PC	6/3/2019	NF-3 Bill Form / HCFA 1500 Form	4/24/2019	73221	\$ 878.67
420	0616391280101014	ECLIPSE MEDICAL IMAGING PC	6/3/2019	NF-3 Bill Form / HCFA 1500 Form	4/9/2019	72148	\$ 912.00

Government Employees Insurance Company, et al v. Eclipse Medical Imaging, et al
Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
421	0094143900101028	ECLIPSE MEDICAL IMAGING PC	6/3/2019	NF-3 Bill Form / HCFA 1500 Form	4/22/2019	73221	\$ 878.67
422	0581654430101015	ECLIPSE MEDICAL IMAGING PC	6/3/2019	NF-3 Bill Form / HCFA 1500 Form	4/23/2019	73221	\$ 878.67
423	0499737080101046	ECLIPSE MEDICAL IMAGING PC	6/6/2019	NF-3 Bill Form / HCFA 1500 Form	4/24/2019	72141	\$ 879.73
424	0611621060101023	ECLIPSE MEDICAL IMAGING PC	6/10/2019	NF-3 Bill Form / HCFA 1500 Form	4/25/2019	73221	\$ 878.67
425	0307716600101084	ECLIPSE MEDICAL IMAGING PC	6/10/2019	NF-3 Bill Form / HCFA 1500 Form	4/26/2019	73600	\$ 73.00
426	0152452020101126	ECLIPSE MEDICAL IMAGING PC	6/10/2019	NF-3 Bill Form / HCFA 1500 Form	4/29/2019	73221	\$ 878.67
427	0444755650101077	ECLIPSE MEDICAL IMAGING PC	6/10/2019	NF-3 Bill Form / HCFA 1500 Form	4/28/2019	73221	\$ 878.67
428	0519759220101021	ECLIPSE MEDICAL IMAGING PC	6/10/2019	NF-3 Bill Form / HCFA 1500 Form	4/29/2019	72148	\$ 912.00
429	0210843200101052	ECLIPSE MEDICAL IMAGING PC	6/10/2019	NF-3 Bill Form / HCFA 1500 Form	4/26/2019	73070	\$ 52.77
430	0210843200101052	ECLIPSE MEDICAL IMAGING PC	6/10/2019	NF-3 Bill Form / HCFA 1500 Form	4/26/2019	73600	\$ 73.00
431	0567120420101033	ECLIPSE MEDICAL IMAGING PC	6/10/2019	NF-3 Bill Form / HCFA 1500 Form	4/28/2019	72148	\$ 912.00
432	0629014640101012	ECLIPSE MEDICAL IMAGING PC	6/14/2019	NF-3 Bill Form / HCFA 1500 Form	4/30/2019	73721	\$ 878.67
433	0624153510101010	ECLIPSE MEDICAL IMAGING PC	6/14/2019	NF-3 Bill Form / HCFA 1500 Form	5/1/2019	73721	\$ 878.67
434	0505150300101022	ECLIPSE MEDICAL IMAGING PC	6/17/2019	NF-3 Bill Form / HCFA 1500 Form	4/28/2019	72141	\$ 659.79
435	0505150300101022	ECLIPSE MEDICAL IMAGING PC	6/17/2019	NF-3 Bill Form / HCFA 1500 Form	4/28/2019	72148	\$ 912.00
436	0616468510101020	ECLIPSE MEDICAL IMAGING PC	6/17/2019	NF-3 Bill Form / HCFA 1500 Form	5/6/2019	73721	\$ 659.00
437	0616468510101020	ECLIPSE MEDICAL IMAGING PC	6/17/2019	NF-3 Bill Form / HCFA 1500 Form	5/6/2019	73221	\$ 878.67
438	0500350790101020	ECLIPSE MEDICAL IMAGING PC	6/17/2019	NF-3 Bill Form / HCFA 1500 Form	7/30/2018	73221	\$ 878.67
439	0500350790101020	ECLIPSE MEDICAL IMAGING PC	6/17/2019	NF-3 Bill Form / HCFA 1500 Form	7/30/2018	73721	\$ 659.00
440	0500350790101020	ECLIPSE MEDICAL IMAGING PC	6/17/2019	NF-3 Bill Form / HCFA 1500 Form	8/19/2018	72148	\$ 912.00
441	0500350790101020	ECLIPSE MEDICAL IMAGING PC	6/17/2019	NF-3 Bill Form / HCFA 1500 Form	8/19/2018	72141	\$ 659.79
442	0414230470101026	ECLIPSE MEDICAL IMAGING PC	6/17/2019	NF-3 Bill Form / HCFA 1500 Form	5/5/2019	72141	\$ 879.73
443	0644921800101015	ECLIPSE MEDICAL IMAGING PC	6/17/2019	NF-3 Bill Form / HCFA 1500 Form	5/6/2019	72141	\$ 659.79
444	0644921800101015	ECLIPSE MEDICAL IMAGING PC	6/17/2019	NF-3 Bill Form / HCFA 1500 Form	5/6/2019	72148	\$ 912.00
445	0320266780101051	ECLIPSE MEDICAL IMAGING PC	6/17/2019	NF-3 Bill Form / HCFA 1500 Form	5/2/2019	72148	\$ 912.00
446	0546784810107029	ECLIPSE MEDICAL IMAGING PC	6/17/2019	NF-3 Bill Form / HCFA 1500 Form	3/5/2019	72131	\$ 581.90
447	0546784810107029	ECLIPSE MEDICAL IMAGING PC	6/17/2019	NF-3 Bill Form / HCFA 1500 Form	3/5/2019	73200	\$ 365.01
448	0546784810107029	ECLIPSE MEDICAL IMAGING PC	6/17/2019	NF-3 Bill Form / HCFA 1500 Form	2/26/2019	73700	\$ 365.01
449	0546784810107029	ECLIPSE MEDICAL IMAGING PC	6/17/2019	NF-3 Bill Form / HCFA 1500 Form	2/26/2019	72125	\$ 581.90
450	0287216210101230	ECLIPSE MEDICAL IMAGING PC	6/17/2019	NF-3 Bill Form / HCFA 1500 Form	5/3/2019	73221	\$ 878.67
451	0336038470101119	ECLIPSE MEDICAL IMAGING PC	5/17/2019	NF-3 Bill Form / HCFA 1500 Form	4/2/2019	72141	\$ 659.79
452	0336038470101119	ECLIPSE MEDICAL IMAGING PC	5/17/2019	NF-3 Bill Form / HCFA 1500 Form	4/2/2019	72148	\$ 912.00
453	0616468510101020	ECLIPSE MEDICAL IMAGING PC	6/24/2019	NF-3 Bill Form / HCFA 1500 Form	5/7/2019	73221	\$ 878.67
454	0616468510101020	ECLIPSE MEDICAL IMAGING PC	6/24/2019	NF-3 Bill Form / HCFA 1500 Form	5/7/2019	73721	\$ 659.00
455	0644921800101015	ECLIPSE MEDICAL IMAGING PC	6/24/2019	NF-3 Bill Form / HCFA 1500 Form	5/7/2019	73221	\$ 659.00
456	0644921800101015	ECLIPSE MEDICAL IMAGING PC	6/24/2019	NF-3 Bill Form / HCFA 1500 Form	5/7/2019	72148	\$ 912.00
457	0289715200101116	ECLIPSE MEDICAL IMAGING PC	6/24/2019	NF-3 Bill Form / HCFA 1500 Form	5/7/2019	73721	\$ 878.67
458	0111643930101236	ECLIPSE MEDICAL IMAGING PC	6/24/2019	NF-3 Bill Form / HCFA 1500 Form	5/7/2019	73221	\$ 878.67
459	0637284230101017	ECLIPSE MEDICAL IMAGING PC	6/24/2019	NF-3 Bill Form / HCFA 1500 Form	5/8/2019	72148	\$ 912.00
460	0463318340101035	ECLIPSE MEDICAL IMAGING PC	6/24/2019	NF-3 Bill Form / HCFA 1500 Form	5/9/2019	72148	\$ 912.00
461	0444755650101077	ECLIPSE MEDICAL IMAGING PC	6/24/2019	NF-3 Bill Form / HCFA 1500 Form	5/12/2019	72148	\$ 912.00
462	0444755650101077	ECLIPSE MEDICAL IMAGING PC	6/24/2019	NF-3 Bill Form / HCFA 1500 Form	5/12/2019	72141	\$ 659.79
463	0519278110101058	ECLIPSE MEDICAL IMAGING PC	6/24/2019	NF-3 Bill Form / HCFA 1500 Form	5/12/2019	73560	\$ 55.54
464	0519278110101058	ECLIPSE MEDICAL IMAGING PC	6/24/2019	NF-3 Bill Form / HCFA 1500 Form	5/12/2019	72141	\$ 659.79
465	0519278110101058	ECLIPSE MEDICAL IMAGING PC	6/24/2019	NF-3 Bill Form / HCFA 1500 Form	5/12/2019	73721	\$ 878.67
466	0630813630101024	ECLIPSE MEDICAL IMAGING PC	6/24/2019	NF-3 Bill Form / HCFA 1500 Form	5/10/2019	72146	\$ 959.61
467	0630813630101024	ECLIPSE MEDICAL IMAGING PC	6/24/2019	NF-3 Bill Form / HCFA 1500 Form	5/10/2019	73721	\$ 659.00
468	0307716600101084	ECLIPSE MEDICAL IMAGING PC	6/24/2019	NF-3 Bill Form / HCFA 1500 Form	5/10/2019	72148	\$ 912.00
469	0307716600101084	ECLIPSE MEDICAL IMAGING PC	6/24/2019	NF-3 Bill Form / HCFA 1500 Form	5/10/2019	72141	\$ 659.79
470	0639053570101012	ECLIPSE MEDICAL IMAGING PC	6/24/2019	NF-3 Bill Form / HCFA 1500 Form	5/9/2019	73721	\$ 878.67
471	0645275840101017	ECLIPSE MEDICAL IMAGING PC	6/24/2019	NF-3 Bill Form / HCFA 1500 Form	5/10/2019	73721	\$ 878.67
472	0589672620101027	ECLIPSE MEDICAL IMAGING PC	6/24/2019	NF-3 Bill Form / HCFA 1500 Form	5/7/2019	72148	\$ 912.00
473	0159989450101046	ECLIPSE MEDICAL IMAGING PC	6/24/2019	NF-3 Bill Form / HCFA 1500 Form	5/12/2019	73721	\$ 659.00
474	0159989450101046	ECLIPSE MEDICAL IMAGING PC	6/24/2019	NF-3 Bill Form / HCFA 1500 Form	5/12/2019	72141	\$ 879.73
475	0619236420101068	ECLIPSE MEDICAL IMAGING PC	6/24/2019	NF-3 Bill Form / HCFA 1500 Form	5/9/2019	72141	\$ 879.73
476	0461749800101028	ECLIPSE MEDICAL IMAGING PC	6/24/2019	NF-3 Bill Form / HCFA 1500 Form	5/8/2019	73221	\$ 878.67
477	0455898600101023	ECLIPSE MEDICAL IMAGING PC	6/24/2019	NF-3 Bill Form / HCFA 1500 Form	5/8/2019	73560	\$ 55.54
478	0455898600101023	ECLIPSE MEDICAL IMAGING PC	6/24/2019	NF-3 Bill Form / HCFA 1500 Form	5/8/2019	73550	\$ 80.93
479	0094143900101028	ECLIPSE MEDICAL IMAGING PC	6/27/2019	NF-3 Bill Form / HCFA 1500 Form	5/13/2019	72141	\$ 879.73
480	0530706960101021	ECLIPSE MEDICAL IMAGING PC	6/27/2019	NF-3 Bill Form / HCFA 1500 Form	5/13/2019	72148	\$ 912.00
481	0284311510101031	ECLIPSE MEDICAL IMAGING PC	6/27/2019	NF-3 Bill Form / HCFA 1500 Form	5/15/2019	73721	\$ 878.67
482	0541833190101022	ECLIPSE MEDICAL IMAGING PC	6/27/2019	NF-3 Bill Form / HCFA 1500 Form	5/13/2019	72148	\$ 912.00
483	0629014640101012	ECLIPSE MEDICAL IMAGING PC	6/27/2019	NF-3 Bill Form / HCFA 1500 Form	5/14/2019	72148	\$ 912.00
484	0629014640101012	ECLIPSE MEDICAL IMAGING PC	6/27/2019	NF-3 Bill Form / HCFA 1500 Form	5/14/2019	72141	\$ 659.79
485	0584322650101027	ECLIPSE MEDICAL IMAGING PC	6/27/2019	NF-3 Bill Form / HCFA 1500 Form	5/15/2019	72148	\$ 912.00
486	0584322650101027	ECLIPSE MEDICAL IMAGING PC	6/27/2019	NF-3 Bill Form / HCFA 1500 Form	5/15/2019	72141	\$ 659.79
487	0644921800101015	ECLIPSE MEDICAL IMAGING PC	6/27/2019	NF-3 Bill Form / HCFA 1500 Form	5/15/2019	72141	\$ 879.73
488	0551057520101042	ECLIPSE MEDICAL IMAGING PC	6/27/2019	NF-3 Bill Form / HCFA 1500 Form	5/13/2019	70551	\$ 874.44
489	0505150300101022	ECLIPSE MEDICAL IMAGING PC	6/27/2019	NF-3 Bill Form / HCFA 1500 Form	5/15/2019	73221	\$ 878.67
490	0159989450101046	ECLIPSE MEDICAL IMAGING PC	7/1/2019	NF-3 Bill Form / HCFA 1500 Form	5/19/2019	72141	\$ 659.79

Government Employees Insurance Company, et al v. Eclipse Medical Imaging, et al
Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
491	0159989450101046	ECLIPSE MEDICAL IMAGING PC	7/1/2019	NF-3 Bill Form / HCFA 1500 Form	5/19/2019	72148	\$ 912.00
492	0429580970101022	ECLIPSE MEDICAL IMAGING PC	7/1/2019	NF-3 Bill Form / HCFA 1500 Form	5/16/2019	73221	\$ 878.67
493	0429580970101022	ECLIPSE MEDICAL IMAGING PC	7/1/2019	NF-3 Bill Form / HCFA 1500 Form	5/16/2019	70551	\$ 655.83
494	0649831640101023	ECLIPSE MEDICAL IMAGING PC	7/1/2019	NF-3 Bill Form / HCFA 1500 Form	5/17/2019	72141	\$ 879.73
495	0657297850101013	ECLIPSE MEDICAL IMAGING PC	7/1/2019	NF-3 Bill Form / HCFA 1500 Form	5/19/2019	72141	\$ 879.73
496	0611621060101023	ECLIPSE MEDICAL IMAGING PC	7/1/2019	NF-3 Bill Form / HCFA 1500 Form	5/19/2019	73221	\$ 878.67
497	0152452020101126	ECLIPSE MEDICAL IMAGING PC	7/1/2019	NF-3 Bill Form / HCFA 1500 Form	5/16/2019	72141	\$ 659.79
498	0152452020101126	ECLIPSE MEDICAL IMAGING PC	7/1/2019	NF-3 Bill Form / HCFA 1500 Form	5/16/2019	72148	\$ 912.00
499	0111643930101236	ECLIPSE MEDICAL IMAGING PC	7/1/2019	NF-3 Bill Form / HCFA 1500 Form	5/16/2019	72148	\$ 912.00
500	0106875160101059	ECLIPSE MEDICAL IMAGING PC	7/1/2019	NF-3 Bill Form / HCFA 1500 Form	5/16/2019	73721	\$ 878.67
501	0558450260101012	ECLIPSE MEDICAL IMAGING PC	7/1/2019	NF-3 Bill Form / HCFA 1500 Form	5/17/2019	73221	\$ 878.67
502	0558450260101012	ECLIPSE MEDICAL IMAGING PC	7/1/2019	NF-3 Bill Form / HCFA 1500 Form	5/17/2019	73721	\$ 659.00
503	059540350101010	ECLIPSE MEDICAL IMAGING PC	7/1/2019	NF-3 Bill Form / HCFA 1500 Form	5/14/2019	73221	\$ 878.67
504	0569129710101015	ECLIPSE MEDICAL IMAGING PC	7/5/2019	NF-3 Bill Form / HCFA 1500 Form	5/22/2019	73221	\$ 878.67
505	0317609110101033	ECLIPSE MEDICAL IMAGING PC	7/5/2019	NF-3 Bill Form / HCFA 1500 Form	5/22/2019	73721	\$ 878.67
506	0317609110101033	ECLIPSE MEDICAL IMAGING PC	7/5/2019	NF-3 Bill Form / HCFA 1500 Form	5/22/2019	73721	\$ 878.67
507	0111643930101114	ECLIPSE MEDICAL IMAGING PC	7/5/2019	NF-3 Bill Form / HCFA 1500 Form	5/22/2019	73221	\$ 878.67
508	0581654430101015	ECLIPSE MEDICAL IMAGING PC	7/5/2019	NF-3 Bill Form / HCFA 1500 Form	5/20/2019	72148	\$ 912.00
509	0635893810101015	ECLIPSE MEDICAL IMAGING PC	7/5/2019	NF-3 Bill Form / HCFA 1500 Form	5/23/2019	72148	\$ 912.00
510	0630813630101024	ECLIPSE MEDICAL IMAGING PC	7/5/2019	NF-3 Bill Form / HCFA 1500 Form	5/20/2019	72141	\$ 879.73
511	0558987770101021	ECLIPSE MEDICAL IMAGING PC	7/5/2019	NF-3 Bill Form / HCFA 1500 Form	5/20/2019	73221	\$ 878.67
512	0538594710101034	ECLIPSE MEDICAL IMAGING PC	7/5/2019	NF-3 Bill Form / HCFA 1500 Form	5/21/2019	70551	\$ 874.44
513	0541833190101022	ECLIPSE MEDICAL IMAGING PC	7/5/2019	NF-3 Bill Form / HCFA 1500 Form	5/20/2019	72141	\$ 879.73
514	0307716600101084	ECLIPSE MEDICAL IMAGING PC	7/8/2019	NF-3 Bill Form / HCFA 1500 Form	5/24/2019	70551	\$ 655.83
515	0307716600101084	ECLIPSE MEDICAL IMAGING PC	7/8/2019	NF-3 Bill Form / HCFA 1500 Form	5/24/2019	73718	\$ 901.42
516	0526551260101024	ECLIPSE MEDICAL IMAGING PC	7/8/2019	NF-3 Bill Form / HCFA 1500 Form	5/24/2019	73721	\$ 878.67
517	0584468970101021	ECLIPSE MEDICAL IMAGING PC	7/8/2019	NF-3 Bill Form / HCFA 1500 Form	5/29/2019	73721	\$ 878.67
518	0657297850101013	ECLIPSE MEDICAL IMAGING PC	7/8/2019	NF-3 Bill Form / HCFA 1500 Form	5/26/2019	72148	\$ 912.00
519	0558450260101012	ECLIPSE MEDICAL IMAGING PC	7/8/2019	NF-3 Bill Form / HCFA 1500 Form	5/28/2019	73721	\$ 878.67
520	0284240570101062	ECLIPSE MEDICAL IMAGING PC	7/8/2019	NF-3 Bill Form / HCFA 1500 Form	5/29/2019	73721	\$ 878.67
521	0519278110101058	ECLIPSE MEDICAL IMAGING PC	7/8/2019	NF-3 Bill Form / HCFA 1500 Form	5/26/2019	72148	\$ 912.00
522	0571309150101024	ECLIPSE MEDICAL IMAGING PC	7/8/2019	NF-3 Bill Form / HCFA 1500 Form	5/24/2019	72148	\$ 912.00
523	0369169360101057	ECLIPSE MEDICAL IMAGING PC	6/26/2019	NF-3 Bill Form / HCFA 1500 Form	5/9/2019	72141	\$ 659.79
524	0369169360101057	ECLIPSE MEDICAL IMAGING PC	6/26/2019	NF-3 Bill Form / HCFA 1500 Form	5/9/2019	72148	\$ 912.00
525	0655361020101022	ECLIPSE MEDICAL IMAGING PC	7/8/2019	NF-3 Bill Form / HCFA 1500 Form	5/29/2019	72141	\$ 659.79
526	0655361020101022	ECLIPSE MEDICAL IMAGING PC	7/8/2019	NF-3 Bill Form / HCFA 1500 Form	5/29/2019	72148	\$ 912.00
527	0541833190101022	ECLIPSE MEDICAL IMAGING PC	7/8/2019	NF-3 Bill Form / HCFA 1500 Form	5/28/2019	73221	\$ 878.67
528	0394959760101015	ECLIPSE MEDICAL IMAGING PC	7/10/2019	NF-3 Bill Form / HCFA 1500 Form	5/26/2019	72141	\$ 659.79
529	0394959760101015	ECLIPSE MEDICAL IMAGING PC	7/10/2019	NF-3 Bill Form / HCFA 1500 Form	5/26/2019	72148	\$ 912.00
530	0586351080101024	ECLIPSE MEDICAL IMAGING PC	7/10/2019	NF-3 Bill Form / HCFA 1500 Form	5/28/2019	72141	\$ 879.73
531	05138594710101034	ECLIPSE MEDICAL IMAGING PC	7/10/2019	NF-3 Bill Form / HCFA 1500 Form	5/29/2019	72148	\$ 912.00
532	0538594710101034	ECLIPSE MEDICAL IMAGING PC	7/10/2019	NF-3 Bill Form / HCFA 1500 Form	5/29/2019	72141	\$ 659.79
533	0521347310101022	ECLIPSE MEDICAL IMAGING PC	7/15/2019	NF-3 Bill Form / HCFA 1500 Form	6/5/2019	73721	\$ 878.67
534	0550623960101015	ECLIPSE MEDICAL IMAGING PC	7/15/2019	NF-3 Bill Form / HCFA 1500 Form	6/4/2019	70551	\$ 874.44
535	0414230470101026	ECLIPSE MEDICAL IMAGING PC	7/15/2019	NF-3 Bill Form / HCFA 1500 Form	6/3/2019	72146	\$ 959.61
536	0414230470101026	ECLIPSE MEDICAL IMAGING PC	7/15/2019	NF-3 Bill Form / HCFA 1500 Form	6/3/2019	72148	\$ 456.00
537	0617434330101011	ECLIPSE MEDICAL IMAGING PC	7/15/2019	NF-3 Bill Form / HCFA 1500 Form	6/3/2019	73221	\$ 878.67
538	0521347310101022	ECLIPSE MEDICAL IMAGING PC	7/15/2019	NF-3 Bill Form / HCFA 1500 Form	6/3/2019	73721	\$ 878.67
539	0551057520101042	ECLIPSE MEDICAL IMAGING PC	7/15/2019	NF-3 Bill Form / HCFA 1500 Form	6/2/2019	73721	\$ 659.00
540	0551057520101042	ECLIPSE MEDICAL IMAGING PC	7/15/2019	NF-3 Bill Form / HCFA 1500 Form	6/2/2019	72141	\$ 879.73
541	0609157580101023	ECLIPSE MEDICAL IMAGING PC	7/15/2019	NF-3 Bill Form / HCFA 1500 Form	6/2/2019	73221	\$ 659.00
542	0609157580101023	ECLIPSE MEDICAL IMAGING PC	7/15/2019	NF-3 Bill Form / HCFA 1500 Form	6/2/2019	73721	\$ 878.67
543	0347270910101048	ECLIPSE MEDICAL IMAGING PC	7/15/2019	NF-3 Bill Form / HCFA 1500 Form	6/2/2019	72141	\$ 659.79
544	0347270910101048	ECLIPSE MEDICAL IMAGING PC	7/15/2019	NF-3 Bill Form / HCFA 1500 Form	6/2/2019	72148	\$ 912.00
545	0500904010101036	ECLIPSE MEDICAL IMAGING PC	7/15/2019	NF-3 Bill Form / HCFA 1500 Form	5/30/2019	73721	\$ 659.00
546	0500904010101036	ECLIPSE MEDICAL IMAGING PC	7/15/2019	NF-3 Bill Form / HCFA 1500 Form	5/30/2019	73221	\$ 878.67
547	0625805590101047	ECLIPSE MEDICAL IMAGING PC	7/15/2019	NF-3 Bill Form / HCFA 1500 Form	5/31/2019	73721	\$ 878.67
548	0170106510101040	ECLIPSE MEDICAL IMAGING PC	7/15/2019	NF-3 Bill Form / HCFA 1500 Form	3/14/2019	72131	\$ 436.42
549	0170106510101040	ECLIPSE MEDICAL IMAGING PC	7/15/2019	NF-3 Bill Form / HCFA 1500 Form	3/14/2019	72125	\$ 581.90
550	0639907870101016	ECLIPSE MEDICAL IMAGING PC	7/15/2019	NF-3 Bill Form / HCFA 1500 Form	5/30/2019	72146	\$ 959.61
551	0284240570101062	ECLIPSE MEDICAL IMAGING PC	7/15/2019	NF-3 Bill Form / HCFA 1500 Form	5/31/2019	73221	\$ 878.67
552	0461655840101052	ECLIPSE MEDICAL IMAGING PC	7/15/2019	NF-3 Bill Form / HCFA 1500 Form	5/31/2019	73718	\$ 901.42
553	0287216210101230	ECLIPSE MEDICAL IMAGING PC	7/18/2019	NF-3 Bill Form / HCFA 1500 Form	3/28/2019	73721	\$ 878.67
554	0193464590101114	ECLIPSE MEDICAL IMAGING PC	7/22/2019	NF-3 Bill Form / HCFA 1500 Form	6/6/2019	72141	\$ 659.79
555	0193464590101114	ECLIPSE MEDICAL IMAGING PC	7/22/2019	NF-3 Bill Form / HCFA 1500 Form	6/6/2019	72148	\$ 912.00
556	0655361020101022	ECLIPSE MEDICAL IMAGING PC	7/22/2019	NF-3 Bill Form / HCFA 1500 Form	6/6/2019	72141	\$ 879.73
557	0118933870101038	ECLIPSE MEDICAL IMAGING PC	7/22/2019	NF-3 Bill Form / HCFA 1500 Form	6/10/2019	73721	\$ 878.67
558	0229668710101121	ECLIPSE MEDICAL IMAGING PC	7/22/2019	NF-3 Bill Form / HCFA 1500 Form	6/7/2019	73721	\$ 878.67
559	0347270910101048	ECLIPSE MEDICAL IMAGING PC	7/22/2019	NF-3 Bill Form / HCFA 1500 Form	6/9/2019	73721	\$ 878.67
560	0106875160101059	ECLIPSE MEDICAL IMAGING PC	7/22/2019	NF-3 Bill Form / HCFA 1500 Form	6/7/2019	72148	\$ 912.00

Government Employees Insurance Company, et al v. Eclipse Medical Imaging, et al
Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
561	0106875160101059	ECLIPSE MEDICAL IMAGING PC	7/22/2019	NF-3 Bill Form / HCFA 1500 Form	6/7/2019	72141	\$ 659.79
562	0229668710101121	ECLIPSE MEDICAL IMAGING PC	7/22/2019	NF-3 Bill Form / HCFA 1500 Form	6/7/2019	73721	\$ 878.67
563	0248355300101086	ECLIPSE MEDICAL IMAGING PC	7/22/2019	NF-3 Bill Form / HCFA 1500 Form	6/10/2019	72148	\$ 912.00
564	0248355300101086	ECLIPSE MEDICAL IMAGING PC	7/22/2019	NF-3 Bill Form / HCFA 1500 Form	6/10/2019	72141	\$ 659.79
565	0506007670101033	ECLIPSE MEDICAL IMAGING PC	7/22/2019	NF-3 Bill Form / HCFA 1500 Form	6/6/2019	73221	\$ 878.67
566	0500904010101036	ECLIPSE MEDICAL IMAGING PC	7/23/2019	NF-3 Bill Form / HCFA 1500 Form	6/10/2019	72141	\$ 659.79
567	0500904010101036	ECLIPSE MEDICAL IMAGING PC	7/23/2019	NF-3 Bill Form / HCFA 1500 Form	6/10/2019	72148	\$ 912.00
568	0313860760101047	ECLIPSE MEDICAL IMAGING PC	7/23/2019	NF-3 Bill Form / HCFA 1500 Form	6/10/2019	73721	\$ 878.67
569	0558450260101012	ECLIPSE MEDICAL IMAGING PC	7/23/2019	NF-3 Bill Form / HCFA 1500 Form	6/10/2019	72148	\$ 912.00
570	0504366080101013	ECLIPSE MEDICAL IMAGING PC	7/24/2019	NF-3 Bill Form / HCFA 1500 Form	6/9/2019	73721	\$ 878.67
571	0347270910101048	ECLIPSE MEDICAL IMAGING PC	7/25/2019	NF-3 Bill Form / HCFA 1500 Form	6/12/2019	73030	\$ 94.69
572	0347270910101048	ECLIPSE MEDICAL IMAGING PC	7/25/2019	NF-3 Bill Form / HCFA 1500 Form	6/12/2019	73030	\$ 71.02
573	0521347310101022	ECLIPSE MEDICAL IMAGING PC	7/25/2019	NF-3 Bill Form / HCFA 1500 Form	6/12/2019	73221	\$ 878.67
574	0500904010101036	ECLIPSE MEDICAL IMAGING PC	7/25/2019	NF-3 Bill Form / HCFA 1500 Form	6/11/2019	72148	\$ 912.00
575	0500904010101036	ECLIPSE MEDICAL IMAGING PC	7/25/2019	NF-3 Bill Form / HCFA 1500 Form	6/11/2019	72141	\$ 659.79
576	0284240570101062	ECLIPSE MEDICAL IMAGING PC	7/25/2019	NF-3 Bill Form / HCFA 1500 Form	6/12/2019	72148	\$ 912.00
577	0369725240101037	ECLIPSE MEDICAL IMAGING PC	7/25/2019	NF-3 Bill Form / HCFA 1500 Form	6/11/2019	73221	\$ 659.00
578	0369725240101037	ECLIPSE MEDICAL IMAGING PC	7/25/2019	NF-3 Bill Form / HCFA 1500 Form	6/11/2019	73721	\$ 878.67
579	0563286710101027	ECLIPSE MEDICAL IMAGING PC	7/25/2019	NF-3 Bill Form / HCFA 1500 Form	6/11/2019	72148	\$ 912.00
580	0563286710101027	ECLIPSE MEDICAL IMAGING PC	7/25/2019	NF-3 Bill Form / HCFA 1500 Form	6/11/2019	72141	\$ 659.79
581	0558450260101012	ECLIPSE MEDICAL IMAGING PC	7/29/2019	NF-3 Bill Form / HCFA 1500 Form	6/14/2019	72141	\$ 879.73
582	0289288740101061	ECLIPSE MEDICAL IMAGING PC	7/29/2019	NF-3 Bill Form / HCFA 1500 Form	6/14/2019	73721	\$ 878.67
583	0543702710101028	ECLIPSE MEDICAL IMAGING PC	7/29/2019	NF-3 Bill Form / HCFA 1500 Form	6/14/2019	72148	\$ 912.00
584	0347806860101023	ECLIPSE MEDICAL IMAGING PC	7/30/2019	NF-3 Bill Form / HCFA 1500 Form	6/13/2019	73721	\$ 878.67
585	0655361020101022	ECLIPSE MEDICAL IMAGING PC	8/1/2019	NF-3 Bill Form / HCFA 1500 Form	6/19/2019	72148	\$ 912.00
586	0649831640101015	ECLIPSE MEDICAL IMAGING PC	8/1/2019	NF-3 Bill Form / HCFA 1500 Form	6/19/2019	72141	\$ 659.79
587	0649831640101015	ECLIPSE MEDICAL IMAGING PC	8/1/2019	NF-3 Bill Form / HCFA 1500 Form	6/19/2019	72148	\$ 912.00
588	0429409230101020	ECLIPSE MEDICAL IMAGING PC	8/1/2019	NF-3 Bill Form / HCFA 1500 Form	6/18/2019	73721	\$ 878.67
589	0504114570101030	ECLIPSE MEDICAL IMAGING PC	8/1/2019	NF-3 Bill Form / HCFA 1500 Form	6/19/2019	73721	\$ 878.67
590	0609157580101023	ECLIPSE MEDICAL IMAGING PC	8/2/2019	NF-3 Bill Form / HCFA 1500 Form	6/18/2019	72148	\$ 912.00
591	0609157580101023	ECLIPSE MEDICAL IMAGING PC	8/2/2019	NF-3 Bill Form / HCFA 1500 Form	6/18/2019	72141	\$ 659.79
592	0504366080101013	ECLIPSE MEDICAL IMAGING PC	8/5/2019	NF-3 Bill Form / HCFA 1500 Form	6/23/2019	72141	\$ 879.73
593	0551057520101042	ECLIPSE MEDICAL IMAGING PC	8/5/2019	NF-3 Bill Form / HCFA 1500 Form	6/24/2019	72148	\$ 912.00
594	0585628870101020	ECLIPSE MEDICAL IMAGING PC	8/5/2019	NF-3 Bill Form / HCFA 1500 Form	6/24/2019	73221	\$ 878.67
595	0544191270101041	ECLIPSE MEDICAL IMAGING PC	8/5/2019	NF-3 Bill Form / HCFA 1500 Form	6/20/2019	73221	\$ 878.67
596	0437980460101070	ECLIPSE MEDICAL IMAGING PC	8/5/2019	NF-3 Bill Form / HCFA 1500 Form	6/21/2019	73721	\$ 878.67
597	0585628870101020	ECLIPSE MEDICAL IMAGING PC	8/6/2019	NF-3 Bill Form / HCFA 1500 Form	6/24/2019	73718	\$ 901.42
598	0599510550101013	ECLIPSE MEDICAL IMAGING PC	8/6/2019	NF-3 Bill Form / HCFA 1500 Form	6/20/2019	72148	\$ 912.00
599	0506007670101033	ECLIPSE MEDICAL IMAGING PC	8/6/2019	NF-3 Bill Form / HCFA 1500 Form	6/20/2019	72148	\$ 912.00
600	0506007670101033	ECLIPSE MEDICAL IMAGING PC	8/6/2019	NF-3 Bill Form / HCFA 1500 Form	6/20/2019	72141	\$ 659.79
601	0586351080101024	ECLIPSE MEDICAL IMAGING PC	8/6/2019	NF-3 Bill Form / HCFA 1500 Form	6/20/2019	72148	\$ 912.00
602	0586351080101024	ECLIPSE MEDICAL IMAGING PC	8/6/2019	NF-3 Bill Form / HCFA 1500 Form	6/20/2019	73721	\$ 659.00
603	0563292930101037	ECLIPSE MEDICAL IMAGING PC	8/8/2019	NF-3 Bill Form / HCFA 1500 Form	6/26/2019	72148	\$ 912.00
604	0563292930101037	ECLIPSE MEDICAL IMAGING PC	8/8/2019	NF-3 Bill Form / HCFA 1500 Form	6/26/2019	72141	\$ 659.79
605	0563292930101037	ECLIPSE MEDICAL IMAGING PC	8/8/2019	NF-3 Bill Form / HCFA 1500 Form	6/26/2019	73120	\$ 47.61
606	0563292930101037	ECLIPSE MEDICAL IMAGING PC	8/8/2019	NF-3 Bill Form / HCFA 1500 Form	6/26/2019	73100	\$ 46.42
607	0369725240101037	ECLIPSE MEDICAL IMAGING PC	8/8/2019	NF-3 Bill Form / HCFA 1500 Form	6/25/2019	72148	\$ 912.00
608	0369725240101037	ECLIPSE MEDICAL IMAGING PC	8/8/2019	NF-3 Bill Form / HCFA 1500 Form	6/25/2019	72141	\$ 659.79
609	0118933870101038	ECLIPSE MEDICAL IMAGING PC	8/8/2019	NF-3 Bill Form / HCFA 1500 Form	6/25/2019	73221	\$ 878.67
610	0643027360101014	ECLIPSE MEDICAL IMAGING PC	8/8/2019	NF-3 Bill Form / HCFA 1500 Form	6/26/2019	73560	\$ 74.06
611	0509356670101064	ECLIPSE MEDICAL IMAGING PC	8/9/2019	NF-3 Bill Form / HCFA 1500 Form	6/26/2019	73721	\$ 878.67
612	0617434330101011	ECLIPSE MEDICAL IMAGING PC	8/9/2019	NF-3 Bill Form / HCFA 1500 Form	6/23/2019	73721	\$ 659.00
613	0617434330101011	ECLIPSE MEDICAL IMAGING PC	8/9/2019	NF-3 Bill Form / HCFA 1500 Form	6/23/2019	72141	\$ 879.73
614	0284240570101062	ECLIPSE MEDICAL IMAGING PC	8/9/2019	NF-3 Bill Form / HCFA 1500 Form	6/25/2019	72141	\$ 879.73
615	0428019910101041	ECLIPSE MEDICAL IMAGING PC	8/9/2019	NF-3 Bill Form / HCFA 1500 Form	6/25/2019	73721	\$ 878.67
616	0428019910101041	ECLIPSE MEDICAL IMAGING PC	8/9/2019	NF-3 Bill Form / HCFA 1500 Form	6/25/2019	70551	\$ 655.83
617	0578309630101019	ECLIPSE MEDICAL IMAGING PC	8/12/2019	NF-3 Bill Form / HCFA 1500 Form	6/26/2019	72131	\$ 581.90
618	0585628870101020	ECLIPSE MEDICAL IMAGING PC	8/12/2019	NF-3 Bill Form / HCFA 1500 Form	6/30/2019	73221	\$ 878.67
619	0585628870101020	ECLIPSE MEDICAL IMAGING PC	8/12/2019	NF-3 Bill Form / HCFA 1500 Form	6/27/2019	73221	\$ 878.67
620	0347806860101023	ECLIPSE MEDICAL IMAGING PC	8/12/2019	NF-3 Bill Form / HCFA 1500 Form	6/27/2019	72141	\$ 659.79
621	0347806860101023	ECLIPSE MEDICAL IMAGING PC	8/12/2019	NF-3 Bill Form / HCFA 1500 Form	6/27/2019	72148	\$ 912.00
622	0550623960101015	ECLIPSE MEDICAL IMAGING PC	8/12/2019	NF-3 Bill Form / HCFA 1500 Form	6/27/2019	72141	\$ 879.73
623	0550623960101015	ECLIPSE MEDICAL IMAGING PC	8/12/2019	NF-3 Bill Form / HCFA 1500 Form	6/27/2019	73221	\$ 659.00
624	0519129690101107	ECLIPSE MEDICAL IMAGING PC	8/12/2019	NF-3 Bill Form / HCFA 1500 Form	6/30/2019	73721	\$ 878.67
625	0585628870101020	ECLIPSE MEDICAL IMAGING PC	8/15/2019	NF-3 Bill Form / HCFA 1500 Form	7/2/2019	72148	\$ 912.00
626	0461341240101014	ECLIPSE MEDICAL IMAGING PC	8/15/2019	NF-3 Bill Form / HCFA 1500 Form	7/2/2019	72148	\$ 912.00
627	0544191270101041	ECLIPSE MEDICAL IMAGING PC	8/15/2019	NF-3 Bill Form / HCFA 1500 Form	7/2/2019	72148	\$ 912.00
628	0544191270101041	ECLIPSE MEDICAL IMAGING PC	8/15/2019	NF-3 Bill Form / HCFA 1500 Form	7/2/2019	72141	\$ 659.79
629	0585628870101020	ECLIPSE MEDICAL IMAGING PC	8/15/2019	NF-3 Bill Form / HCFA 1500 Form	7/2/2019	72141	\$ 879.73
630	0428019910101041	ECLIPSE MEDICAL IMAGING PC	8/15/2019	NF-3 Bill Form / HCFA 1500 Form	7/2/2019	72148	\$ 912.00

Government Employees Insurance Company, et al v. Eclipse Medical Imaging, et al
Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
631	0428019910101041	ECLIPSE MEDICAL IMAGING PC	8/15/2019	NF-3 Bill Form / HCFA 1500 Form	7/2/2019	72141	\$ 659.79
632	0585628870101020	ECLIPSE MEDICAL IMAGING PC	8/15/2019	NF-3 Bill Form / HCFA 1500 Form	7/2/2019	73221	\$ 878.67
633	0429409230101020	ECLIPSE MEDICAL IMAGING PC	8/16/2019	NF-3 Bill Form / HCFA 1500 Form	7/2/2019	73721	\$ 878.67
634	0585628870101020	ECLIPSE MEDICAL IMAGING PC	8/19/2019	NF-3 Bill Form / HCFA 1500 Form	7/8/2019	72141	\$ 879.73
635	0375988470101018	ECLIPSE MEDICAL IMAGING PC	8/19/2019	NF-3 Bill Form / HCFA 1500 Form	7/3/2019	73560	\$ 55.54
636	0375988470101018	ECLIPSE MEDICAL IMAGING PC	8/19/2019	NF-3 Bill Form / HCFA 1500 Form	7/3/2019	72100	\$ 65.86
637	0375988470101018	ECLIPSE MEDICAL IMAGING PC	8/19/2019	NF-3 Bill Form / HCFA 1500 Form	7/3/2019	72070	\$ 69.82
638	0375988470101018	ECLIPSE MEDICAL IMAGING PC	8/19/2019	NF-3 Bill Form / HCFA 1500 Form	7/3/2019	72040	\$ 96.27
639	0363746350101027	ECLIPSE MEDICAL IMAGING PC	8/19/2019	NF-3 Bill Form / HCFA 1500 Form	7/3/2019	73721	\$ 878.67
640	0563292930101037	ECLIPSE MEDICAL IMAGING PC	8/19/2019	NF-3 Bill Form / HCFA 1500 Form	7/5/2019	73221	\$ 878.67
641	0563292930101037	ECLIPSE MEDICAL IMAGING PC	8/19/2019	NF-3 Bill Form / HCFA 1500 Form	7/5/2019	73110	\$ 52.77
642	0563292930101037	ECLIPSE MEDICAL IMAGING PC	8/19/2019	NF-3 Bill Form / HCFA 1500 Form	7/5/2019	73120	\$ 47.61
643	0540654850101131	ECLIPSE MEDICAL IMAGING PC	8/19/2019	NF-3 Bill Form / HCFA 1500 Form	7/7/2019	72148	\$ 912.00
644	0300422110101055	ECLIPSE MEDICAL IMAGING PC	8/19/2019	NF-3 Bill Form / HCFA 1500 Form	7/8/2019	73721	\$ 878.67
645	0585628870101020	ECLIPSE MEDICAL IMAGING PC	8/19/2019	NF-3 Bill Form / HCFA 1500 Form	7/5/2019	72148	\$ 912.00
646	0585628870101020	ECLIPSE MEDICAL IMAGING PC	8/19/2019	NF-3 Bill Form / HCFA 1500 Form	7/5/2019	72141	\$ 659.79
647	0621868140101022	ECLIPSE MEDICAL IMAGING PC	8/19/2019	NF-3 Bill Form / HCFA 1500 Form	7/5/2019	72148	\$ 912.00
648	0621868140101022	ECLIPSE MEDICAL IMAGING PC	8/19/2019	NF-3 Bill Form / HCFA 1500 Form	7/5/2019	72141	\$ 659.79
649	0591724930101019	ECLIPSE MEDICAL IMAGING PC	8/19/2019	NF-3 Bill Form / HCFA 1500 Form	7/5/2019	71100	\$ 66.65
650	0591724930101019	ECLIPSE MEDICAL IMAGING PC	8/19/2019	NF-3 Bill Form / HCFA 1500 Form	7/5/2019	73721	\$ 878.67
651	0549267810101058	ECLIPSE MEDICAL IMAGING PC	8/19/2019	NF-3 Bill Form / HCFA 1500 Form	7/7/2019	72148	\$ 912.00
652	0549267810101058	ECLIPSE MEDICAL IMAGING PC	8/19/2019	NF-3 Bill Form / HCFA 1500 Form	7/7/2019	72141	\$ 659.79
653	0585628870101020	ECLIPSE MEDICAL IMAGING PC	8/19/2019	NF-3 Bill Form / HCFA 1500 Form	7/8/2019	72148	\$ 912.00
654	0585628870101020	ECLIPSE MEDICAL IMAGING PC	8/19/2019	NF-3 Bill Form / HCFA 1500 Form	7/7/2019	72148	\$ 912.00
655	0585628870101020	ECLIPSE MEDICAL IMAGING PC	8/19/2019	NF-3 Bill Form / HCFA 1500 Form	7/7/2019	72141	\$ 659.79
656	0375988470101018	ECLIPSE MEDICAL IMAGING PC	8/20/2019	NF-3 Bill Form / HCFA 1500 Form	7/3/2019	72040	\$ 96.27
657	0375988470101018	ECLIPSE MEDICAL IMAGING PC	8/20/2019	NF-3 Bill Form / HCFA 1500 Form	7/3/2019	73650	\$ 50.78
658	0375988470101018	ECLIPSE MEDICAL IMAGING PC	8/20/2019	NF-3 Bill Form / HCFA 1500 Form	7/3/2019	73600	\$ 54.75
659	0375988470101018	ECLIPSE MEDICAL IMAGING PC	8/20/2019	NF-3 Bill Form / HCFA 1500 Form	7/3/2019	73560	\$ 55.54
660	0375988470101018	ECLIPSE MEDICAL IMAGING PC	8/20/2019	NF-3 Bill Form / HCFA 1500 Form	7/3/2019	72100	\$ 65.86
661	0375988470101018	ECLIPSE MEDICAL IMAGING PC	8/20/2019	NF-3 Bill Form / HCFA 1500 Form	7/3/2019	73030	\$ 71.02
662	0303514130101102	ECLIPSE MEDICAL IMAGING PC	8/22/2019	NF-3 Bill Form / HCFA 1500 Form	7/10/2019	72100	\$ 65.86
663	0303514130101102	ECLIPSE MEDICAL IMAGING PC	8/22/2019	NF-3 Bill Form / HCFA 1500 Form	7/10/2019	72040	\$ 96.27
664	0094143900101028	ECLIPSE MEDICAL IMAGING PC	8/22/2019	NF-3 Bill Form / HCFA 1500 Form	7/9/2019	72148	\$ 912.00
665	0287216210101230	ECLIPSE MEDICAL IMAGING PC	8/22/2019	NF-3 Bill Form / HCFA 1500 Form	3/28/2019	73721	\$ 878.67
666	0548143410101031	ECLIPSE MEDICAL IMAGING PC	8/26/2019	NF-3 Bill Form / HCFA 1500 Form	7/11/2019	73221	\$ 659.00
667	0548143410101031	ECLIPSE MEDICAL IMAGING PC	8/26/2019	NF-3 Bill Form / HCFA 1500 Form	7/11/2019	73221	\$ 878.67
668	0289288740101061	ECLIPSE MEDICAL IMAGING PC	8/26/2019	NF-3 Bill Form / HCFA 1500 Form	7/11/2019	73221	\$ 878.67
669	0551523600101046	ECLIPSE MEDICAL IMAGING PC	8/26/2019	NF-3 Bill Form / HCFA 1500 Form	7/11/2019	73721	\$ 878.67
670	0537320320101029	ECLIPSE MEDICAL IMAGING PC	8/26/2019	NF-3 Bill Form / HCFA 1500 Form	7/11/2019	72148	\$ 912.00
671	0540414430101022	ECLIPSE MEDICAL IMAGING PC	8/26/2019	NF-3 Bill Form / HCFA 1500 Form	7/11/2019	72141	\$ 659.79
672	0540414430101022	ECLIPSE MEDICAL IMAGING PC	8/26/2019	NF-3 Bill Form / HCFA 1500 Form	7/11/2019	72148	\$ 912.00
673	0430292920101022	ECLIPSE MEDICAL IMAGING PC	8/26/2019	NF-3 Bill Form / HCFA 1500 Form	7/14/2019	73718	\$ 901.42
674	0477740760101019	ECLIPSE MEDICAL IMAGING PC	8/26/2019	NF-3 Bill Form / HCFA 1500 Form	7/14/2019	73721	\$ 878.67
675	0317609110101033	ECLIPSE MEDICAL IMAGING PC	8/26/2019	NF-3 Bill Form / HCFA 1500 Form	7/15/2019	72148	\$ 912.00
676	0590472450101016	ECLIPSE MEDICAL IMAGING PC	8/26/2019	NF-3 Bill Form / HCFA 1500 Form	7/15/2019	72148	\$ 912.00
677	0590472450101016	ECLIPSE MEDICAL IMAGING PC	8/26/2019	NF-3 Bill Form / HCFA 1500 Form	7/12/2019	73721	\$ 659.00
678	0590472450101016	ECLIPSE MEDICAL IMAGING PC	8/26/2019	NF-3 Bill Form / HCFA 1500 Form	7/12/2019	72141	\$ 879.73
679	0611219220101015	ECLIPSE MEDICAL IMAGING PC	8/26/2019	NF-3 Bill Form / HCFA 1500 Form	7/15/2019	73721	\$ 878.67
680	0303514130101102	ECLIPSE MEDICAL IMAGING PC	8/26/2019	NF-3 Bill Form / HCFA 1500 Form	7/14/2019	70551	\$ 874.44
681	0303514130101102	ECLIPSE MEDICAL IMAGING PC	8/26/2019	NF-3 Bill Form / HCFA 1500 Form	7/14/2019	73030	\$ 71.02
682	0317609110101033	ECLIPSE MEDICAL IMAGING PC	8/26/2019	NF-3 Bill Form / HCFA 1500 Form	7/15/2019	72148	\$ 912.00
683	0430292920101022	ECLIPSE MEDICAL IMAGING PC	8/26/2019	NF-3 Bill Form / HCFA 1500 Form	7/14/2019	73721	\$ 878.67
684	0533345150101025	ECLIPSE MEDICAL IMAGING PC	8/26/2019	NF-3 Bill Form / HCFA 1500 Form	7/11/2019	73221	\$ 878.67
685	0415194910101013	ECLIPSE MEDICAL IMAGING PC	8/27/2019	NF-3 Bill Form / HCFA 1500 Form	7/14/2019	73718	\$ 901.42
686	0415194910101013	ECLIPSE MEDICAL IMAGING PC	8/27/2019	NF-3 Bill Form / HCFA 1500 Form	7/14/2019	73221	\$ 659.00
687	0414230470101026	ECLIPSE MEDICAL IMAGING PC	8/27/2019	NF-3 Bill Form / HCFA 1500 Form	7/12/2019	72148	\$ 912.00
688	0414230470101026	ECLIPSE MEDICAL IMAGING PC	8/27/2019	NF-3 Bill Form / HCFA 1500 Form	7/12/2019	72141	\$ 659.79
689	0590472450101016	ECLIPSE MEDICAL IMAGING PC	8/29/2019	NF-3 Bill Form / HCFA 1500 Form	7/17/2019	72148	\$ 912.00
690	0375988470101018	ECLIPSE MEDICAL IMAGING PC	8/29/2019	NF-3 Bill Form / HCFA 1500 Form	7/12/2019	73221	\$ 878.67
691	0375988470101018	ECLIPSE MEDICAL IMAGING PC	8/29/2019	NF-3 Bill Form / HCFA 1500 Form	7/12/2019	73721	\$ 659.00
692	0485843680101075	ECLIPSE MEDICAL IMAGING PC	8/29/2019	NF-3 Bill Form / HCFA 1500 Form	7/16/2019	72148	\$ 912.00
693	0485843680101075	ECLIPSE MEDICAL IMAGING PC	8/29/2019	NF-3 Bill Form / HCFA 1500 Form	7/16/2019	73221	\$ 659.00
694	0485843680101075	ECLIPSE MEDICAL IMAGING PC	9/3/2019	NF-3 Bill Form / HCFA 1500 Form	7/18/2019	72141	\$ 879.73
695	0662770090101012	ECLIPSE MEDICAL IMAGING PC	9/3/2019	NF-3 Bill Form / HCFA 1500 Form	7/19/2019	72141	\$ 879.73
696	0485843680101075	ECLIPSE MEDICAL IMAGING PC	9/3/2019	NF-3 Bill Form / HCFA 1500 Form	7/18/2019	73221	\$ 878.67
697	0655813100101017	ECLIPSE MEDICAL IMAGING PC	9/3/2019	NF-3 Bill Form / HCFA 1500 Form	7/19/2019	73721	\$ 878.67
698	0437980460101070	ECLIPSE MEDICAL IMAGING PC	9/3/2019	NF-3 Bill Form / HCFA 1500 Form	7/21/2019	72148	\$ 912.00
699	0131758500101048	ECLIPSE MEDICAL IMAGING PC	9/3/2019	NF-3 Bill Form / HCFA 1500 Form	7/22/2019	72141	\$ 879.73
700	0548143410101031	ECLIPSE MEDICAL IMAGING PC	9/3/2019	NF-3 Bill Form / HCFA 1500 Form	7/19/2019	73221	\$ 878.67

Government Employees Insurance Company, et al v. Eclipse Medical Imaging, et al
Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
701	0662770090101012	ECLIPSE MEDICAL IMAGING PC	9/3/2019	NF-3 Bill Form / HCFA 1500 Form	7/19/2019	73718	\$ 901.42
702	0660893630101011	ECLIPSE MEDICAL IMAGING PC	9/3/2019	NF-3 Bill Form / HCFA 1500 Form	7/18/2019	72148	\$ 912.00
703	0660893630101011	ECLIPSE MEDICAL IMAGING PC	9/3/2019	NF-3 Bill Form / HCFA 1500 Form	7/18/2019	72141	\$ 659.79
704	0375988470101018	ECLIPSE MEDICAL IMAGING PC	9/3/2019	NF-3 Bill Form / HCFA 1500 Form	7/19/2019	72148	\$ 912.00
705	0485843680101075	ECLIPSE MEDICAL IMAGING PC	9/3/2019	NF-3 Bill Form / HCFA 1500 Form	7/22/2019	72148	\$ 912.00
706	0504366080101013	ECLIPSE MEDICAL IMAGING PC	9/3/2019	NF-3 Bill Form / HCFA 1500 Form	7/21/2019	73221	\$ 659.00
707	0504366080101013	ECLIPSE MEDICAL IMAGING PC	9/3/2019	NF-3 Bill Form / HCFA 1500 Form	7/21/2019	72148	\$ 912.00
708	0485843680101075	ECLIPSE MEDICAL IMAGING PC	9/3/2019	NF-3 Bill Form / HCFA 1500 Form	7/22/2019	72141	\$ 879.73
709	0483963370101037	ECLIPSE MEDICAL IMAGING PC	9/3/2019	NF-3 Bill Form / HCFA 1500 Form	7/21/2019	73721	\$ 878.67
710	0362845080101058	ECLIPSE MEDICAL IMAGING PC	9/3/2019	NF-3 Bill Form / HCFA 1500 Form	7/18/2019	73721	\$ 659.00
711	0362845080101058	ECLIPSE MEDICAL IMAGING PC	9/3/2019	NF-3 Bill Form / HCFA 1500 Form	7/18/2019	73221	\$ 878.67
712	0662770090101012	ECLIPSE MEDICAL IMAGING PC	9/6/2019	NF-3 Bill Form / HCFA 1500 Form	7/24/2019	72148	\$ 912.00
713	0507920430101011	ECLIPSE MEDICAL IMAGING PC	9/6/2019	NF-3 Bill Form / HCFA 1500 Form	7/24/2019	73030	\$ 71.02
714	0507920430101011	ECLIPSE MEDICAL IMAGING PC	9/6/2019	NF-3 Bill Form / HCFA 1500 Form	7/24/2019	72040	\$ 72.20
715	0507920430101011	ECLIPSE MEDICAL IMAGING PC	9/6/2019	NF-3 Bill Form / HCFA 1500 Form	7/24/2019	73560	\$ 55.54
716	0507920430101011	ECLIPSE MEDICAL IMAGING PC	9/6/2019	NF-3 Bill Form / HCFA 1500 Form	7/24/2019	72141	\$ 659.79
717	0507920430101011	ECLIPSE MEDICAL IMAGING PC	9/6/2019	NF-3 Bill Form / HCFA 1500 Form	7/24/2019	72148	\$ 912.00
718	0507920430101011	ECLIPSE MEDICAL IMAGING PC	9/6/2019	NF-3 Bill Form / HCFA 1500 Form	7/24/2019	72100	\$ 65.86
719	0461341240101014	ECLIPSE MEDICAL IMAGING PC	9/9/2019	NF-3 Bill Form / HCFA 1500 Form	7/24/2019	72141	\$ 879.73
720	0303534800101034	ECLIPSE MEDICAL IMAGING PC	9/9/2019	NF-3 Bill Form / HCFA 1500 Form	7/23/2019	72141	\$ 879.73
721	0662770090101012	ECLIPSE MEDICAL IMAGING PC	9/6/2019	NF-3 Bill Form / HCFA 1500 Form	7/24/2019	72141	\$ 879.73
722	0588585130101017	ECLIPSE MEDICAL IMAGING PC	9/9/2019	NF-3 Bill Form / HCFA 1500 Form	7/28/2019	73721	\$ 878.67
723	0662770090101012	ECLIPSE MEDICAL IMAGING PC	9/9/2019	NF-3 Bill Form / HCFA 1500 Form	7/26/2019	72148	\$ 912.00
724	0662770090101012	ECLIPSE MEDICAL IMAGING PC	9/9/2019	NF-3 Bill Form / HCFA 1500 Form	7/26/2019	72146	\$ 959.61
725	0548143410101031	ECLIPSE MEDICAL IMAGING PC	9/9/2019	NF-3 Bill Form / HCFA 1500 Form	7/26/2019	72148	\$ 912.00
726	0548143410101031	ECLIPSE MEDICAL IMAGING PC	9/9/2019	NF-3 Bill Form / HCFA 1500 Form	7/26/2019	72141	\$ 659.79
727	0485843680101075	ECLIPSE MEDICAL IMAGING PC	9/9/2019	NF-3 Bill Form / HCFA 1500 Form	7/26/2019	72146	\$ 959.61
728	0581859450101023	ECLIPSE MEDICAL IMAGING PC	9/9/2019	NF-3 Bill Form / HCFA 1500 Form	7/25/2019	73721	\$ 878.67
729	0485843680101075	ECLIPSE MEDICAL IMAGING PC	9/9/2019	NF-3 Bill Form / HCFA 1500 Form	7/25/2019	72148	\$ 912.00
730	0415194910101013	ECLIPSE MEDICAL IMAGING PC	9/10/2019	NF-3 Bill Form / HCFA 1500 Form	7/28/2019	73221	\$ 659.00
731	0415194910101013	ECLIPSE MEDICAL IMAGING PC	9/10/2019	NF-3 Bill Form / HCFA 1500 Form	7/28/2019	73718	\$ 901.42
732	0451450690101051	ECLIPSE MEDICAL IMAGING PC	9/13/2019	NF-3 Bill Form / HCFA 1500 Form	7/30/2019	73721	\$ 878.67
733	0580680300101034	ECLIPSE MEDICAL IMAGING PC	9/13/2019	NF-3 Bill Form / HCFA 1500 Form	7/29/2019	72100	\$ 65.86
734	0580680300101034	ECLIPSE MEDICAL IMAGING PC	9/13/2019	NF-3 Bill Form / HCFA 1500 Form	7/29/2019	73030	\$ 71.02
735	0580680300101034	ECLIPSE MEDICAL IMAGING PC	9/13/2019	NF-3 Bill Form / HCFA 1500 Form	7/29/2019	72040	\$ 96.27
736	0591724930101019	ECLIPSE MEDICAL IMAGING PC	9/13/2019	NF-3 Bill Form / HCFA 1500 Form	7/29/2019	72148	\$ 912.00
737	0580680300101034	ECLIPSE MEDICAL IMAGING PC	9/13/2019	NF-3 Bill Form / HCFA 1500 Form	7/29/2019	72040	\$ 96.27
738	0580680300101034	ECLIPSE MEDICAL IMAGING PC	9/13/2019	NF-3 Bill Form / HCFA 1500 Form	7/29/2019	73030	\$ 71.02
739	0580680300101034	ECLIPSE MEDICAL IMAGING PC	9/13/2019	NF-3 Bill Form / HCFA 1500 Form	7/29/2019	72100	\$ 65.86
740	0580680300101034	ECLIPSE MEDICAL IMAGING PC	9/13/2019	NF-3 Bill Form / HCFA 1500 Form	7/29/2019	73560	\$ 55.54
741	0580680300101034	ECLIPSE MEDICAL IMAGING PC	9/13/2019	NF-3 Bill Form / HCFA 1500 Form	7/29/2019	72040	\$ 96.27
742	0580680300101034	ECLIPSE MEDICAL IMAGING PC	9/13/2019	NF-3 Bill Form / HCFA 1500 Form	7/29/2019	73030	\$ 71.02
743	0580680300101034	ECLIPSE MEDICAL IMAGING PC	9/13/2019	NF-3 Bill Form / HCFA 1500 Form	7/29/2019	73030	\$ 71.02
744	0580680300101034	ECLIPSE MEDICAL IMAGING PC	9/13/2019	NF-3 Bill Form / HCFA 1500 Form	7/29/2019	72100	\$ 65.86
745	0580680300101034	ECLIPSE MEDICAL IMAGING PC	9/13/2019	NF-3 Bill Form / HCFA 1500 Form	7/29/2019	72100	\$ 65.86
746	0580680300101034	ECLIPSE MEDICAL IMAGING PC	9/13/2019	NF-3 Bill Form / HCFA 1500 Form	7/29/2019	73560	\$ 55.54
747	0580680300101034	ECLIPSE MEDICAL IMAGING PC	9/13/2019	NF-3 Bill Form / HCFA 1500 Form	7/29/2019	73560	\$ 55.54
748	0580680300101034	ECLIPSE MEDICAL IMAGING PC	9/13/2019	NF-3 Bill Form / HCFA 1500 Form	7/29/2019	72040	\$ 96.27
749	0527385730101077	ECLIPSE MEDICAL IMAGING PC	9/16/2019	NF-3 Bill Form / HCFA 1500 Form	8/2/2019	72148	\$ 912.00
750	0527385730101077	ECLIPSE MEDICAL IMAGING PC	9/16/2019	NF-3 Bill Form / HCFA 1500 Form	8/2/2019	73721	\$ 659.00
751	0284311510101031	ECLIPSE MEDICAL IMAGING PC	9/12/2019	NF-3 Bill Form / HCFA 1500 Form	5/15/2019	73721	\$ 878.67
752	0279899510101065	ECLIPSE MEDICAL IMAGING PC	9/16/2019	NF-3 Bill Form / HCFA 1500 Form	8/4/2019	72148	\$ 912.00
753	0279899510101065	ECLIPSE MEDICAL IMAGING PC	9/16/2019	NF-3 Bill Form / HCFA 1500 Form	8/4/2019	73221	\$ 659.00
754	0415194910101013	ECLIPSE MEDICAL IMAGING PC	9/16/2019	NF-3 Bill Form / HCFA 1500 Form	8/4/2019	72141	\$ 659.79
755	0415194910101013	ECLIPSE MEDICAL IMAGING PC	9/16/2019	NF-3 Bill Form / HCFA 1500 Form	8/4/2019	72148	\$ 912.00
756	0657624780101013	ECLIPSE MEDICAL IMAGING PC	9/16/2019	NF-3 Bill Form / HCFA 1500 Form	7/31/2019	73721	\$ 878.67
757	0662770090101012	ECLIPSE MEDICAL IMAGING PC	9/16/2019	NF-3 Bill Form / HCFA 1500 Form	7/31/2019	73221	\$ 659.00
758	0662770090101012	ECLIPSE MEDICAL IMAGING PC	9/16/2019	NF-3 Bill Form / HCFA 1500 Form	7/31/2019	72148	\$ 912.00
759	0646064970101016	ECLIPSE MEDICAL IMAGING PC	9/16/2019	NF-3 Bill Form / HCFA 1500 Form	7/31/2019	70450	\$ 455.47
760	0641000310101014	ECLIPSE MEDICAL IMAGING PC	9/16/2019	NF-3 Bill Form / HCFA 1500 Form	8/4/2019	72141	\$ 659.79
761	0641000310101014	ECLIPSE MEDICAL IMAGING PC	9/16/2019	NF-3 Bill Form / HCFA 1500 Form	8/4/2019	72148	\$ 912.00
762	0303534800101034	ECLIPSE MEDICAL IMAGING PC	9/16/2019	NF-3 Bill Form / HCFA 1500 Form	7/31/2019	73721	\$ 878.67
763	0111466580101128	ECLIPSE MEDICAL IMAGING PC	9/16/2019	NF-3 Bill Form / HCFA 1500 Form	7/31/2019	73721	\$ 878.67
764	0111466580101128	ECLIPSE MEDICAL IMAGING PC	9/16/2019	NF-3 Bill Form / HCFA 1500 Form	7/31/2019	73221	\$ 878.67
765	0356822550101080	ECLIPSE MEDICAL IMAGING PC	9/19/2019	NF-3 Bill Form / HCFA 1500 Form	8/5/2019	73221	\$ 878.67
766	0356822550101080	ECLIPSE MEDICAL IMAGING PC	9/19/2019	NF-3 Bill Form / HCFA 1500 Form	8/5/2019	73721	\$ 659.00
767	0507920430101011	ECLIPSE MEDICAL IMAGING PC	9/19/2019	NF-3 Bill Form / HCFA 1500 Form	8/6/2019	73221	\$ 659.00
768	0507920430101011	ECLIPSE MEDICAL IMAGING PC	9/19/2019	NF-3 Bill Form / HCFA 1500 Form	8/6/2019	73721	\$ 878.67
769	0130825620101108	ECLIPSE MEDICAL IMAGING PC	9/19/2019	NF-3 Bill Form / HCFA 1500 Form	8/6/2019	73221	\$ 878.67
770	0106995950101067	ECLIPSE MEDICAL IMAGING PC	9/19/2019	NF-3 Bill Form / HCFA 1500 Form	8/6/2019	72141	\$ 879.73

Government Employees Insurance Company, et al v. Eclipse Medical Imaging, et al
Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
771	0591577590101038	ECLIPSE MEDICAL IMAGING PC	9/19/2019	NF-3 Bill Form / HCFA 1500 Form	8/5/2019	72148	\$ 912.00
772	0375988470101018	ECLIPSE MEDICAL IMAGING PC	9/23/2019	NF-3 Bill Form / HCFA 1500 Form	8/8/2019	72141	\$ 879.73
773	0662083630101017	ECLIPSE MEDICAL IMAGING PC	9/23/2019	NF-3 Bill Form / HCFA 1500 Form	8/7/2019	72141	\$ 659.79
774	0662083630101017	ECLIPSE MEDICAL IMAGING PC	9/23/2019	NF-3 Bill Form / HCFA 1500 Form	8/7/2019	72148	\$ 912.00
775	0415194910101013	ECLIPSE MEDICAL IMAGING PC	9/23/2019	NF-3 Bill Form / HCFA 1500 Form	8/11/2019	72146	\$ 959.61
776	0415194910101013	ECLIPSE MEDICAL IMAGING PC	9/23/2019	NF-3 Bill Form / HCFA 1500 Form	8/11/2019	73721	\$ 659.00
777	0506007670101033	ECLIPSE MEDICAL IMAGING PC	9/23/2019	NF-3 Bill Form / HCFA 1500 Form	8/8/2019	73721	\$ 878.67
778	0580459520101045	ECLIPSE MEDICAL IMAGING PC	9/23/2019	NF-3 Bill Form / HCFA 1500 Form	8/11/2019	73221	\$ 878.67
779	0655365870101016	ECLIPSE MEDICAL IMAGING PC	9/23/2019	NF-3 Bill Form / HCFA 1500 Form	8/11/2019	73221	\$ 878.67
780	0303514130101102	ECLIPSE MEDICAL IMAGING PC	9/23/2019	NF-3 Bill Form / HCFA 1500 Form	8/11/2019	72148	\$ 912.00
781	0303514130101102	ECLIPSE MEDICAL IMAGING PC	9/23/2019	NF-3 Bill Form / HCFA 1500 Form	8/11/2019	73221	\$ 659.00
782	0590472450101016	ECLIPSE MEDICAL IMAGING PC	9/23/2019	NF-3 Bill Form / HCFA 1500 Form	8/7/2019	73721	\$ 878.67
783	0018826140101187	ECLIPSE MEDICAL IMAGING PC	9/23/2019	NF-3 Bill Form / HCFA 1500 Form	8/9/2019	72141	\$ 659.79
784	0018826140101187	ECLIPSE MEDICAL IMAGING PC	9/23/2019	NF-3 Bill Form / HCFA 1500 Form	8/9/2019	72148	\$ 912.00
785	0646064970101016	ECLIPSE MEDICAL IMAGING PC	9/23/2019	NF-3 Bill Form / HCFA 1500 Form	8/7/2019	72141	\$ 659.79
786	0646064970101016	ECLIPSE MEDICAL IMAGING PC	9/23/2019	NF-3 Bill Form / HCFA 1500 Form	8/7/2019	72148	\$ 912.00
787	0018826140101187	ECLIPSE MEDICAL IMAGING PC	9/16/2019	NF-3 Bill Form / HCFA 1500 Form	8/2/2019	73721	\$ 878.67
788	0018826140101187	ECLIPSE MEDICAL IMAGING PC	9/16/2019	NF-3 Bill Form / HCFA 1500 Form	8/2/2019	73221	\$ 659.00
789	0623478070101048	ECLIPSE MEDICAL IMAGING PC	9/19/2019	NF-3 Bill Form / HCFA 1500 Form	4/18/2019	72148	\$ 912.00
790	0362845080101058	ECLIPSE MEDICAL IMAGING PC	9/26/2019	NF-3 Bill Form / HCFA 1500 Form	8/13/2019	72148	\$ 912.00
791	0362845080101058	ECLIPSE MEDICAL IMAGING PC	9/26/2019	NF-3 Bill Form / HCFA 1500 Form	8/13/2019	72141	\$ 659.79
792	0303514130101102	ECLIPSE MEDICAL IMAGING PC	9/26/2019	NF-3 Bill Form / HCFA 1500 Form	8/13/2019	72141	\$ 879.73
793	0645941920101017	ECLIPSE MEDICAL IMAGING PC	9/26/2019	NF-3 Bill Form / HCFA 1500 Form	8/14/2019	73721	\$ 878.67
794	0306001060101069	ECLIPSE MEDICAL IMAGING PC	9/26/2019	NF-3 Bill Form / HCFA 1500 Form	8/12/2019	73070	\$ 70.36
795	0502121560101054	ECLIPSE MEDICAL IMAGING PC	9/26/2019	NF-3 Bill Form / HCFA 1500 Form	8/13/2019	72148	\$ 912.00
796	0502121560101054	ECLIPSE MEDICAL IMAGING PC	9/26/2019	NF-3 Bill Form / HCFA 1500 Form	8/13/2019	73221	\$ 659.00
797	0657113080101048	ECLIPSE MEDICAL IMAGING PC	9/26/2019	NF-3 Bill Form / HCFA 1500 Form	8/12/2019	73221	\$ 659.00
798	0657113080101048	ECLIPSE MEDICAL IMAGING PC	9/26/2019	NF-3 Bill Form / HCFA 1500 Form	8/12/2019	73721	\$ 878.67
799	0361035020101027	ECLIPSE MEDICAL IMAGING PC	9/26/2019	NF-3 Bill Form / HCFA 1500 Form	9/14/2019	72125	\$ 581.90
800	0361035020101027	ECLIPSE MEDICAL IMAGING PC	9/26/2019	NF-3 Bill Form / HCFA 1500 Form	9/14/2019	72131	\$ 436.42
801	0607809400101029	ECLIPSE MEDICAL IMAGING PC	9/26/2019	NF-3 Bill Form / HCFA 1500 Form	8/14/2019	73718	\$ 901.42
802	0492754990101104	ECLIPSE MEDICAL IMAGING PC	9/27/2019	NF-3 Bill Form / HCFA 1500 Form	8/13/2019	73221	\$ 878.67
803	0492754990101104	ECLIPSE MEDICAL IMAGING PC	9/27/2019	NF-3 Bill Form / HCFA 1500 Form	8/13/2019	73700	\$ 365.01
804	0653415630101012	ECLIPSE MEDICAL IMAGING PC	9/27/2019	NF-3 Bill Form / HCFA 1500 Form	8/12/2019	73721	\$ 878.67
805	0159989450101046	ECLIPSE MEDICAL IMAGING PC	9/27/2019	NF-3 Bill Form / HCFA 1500 Form	8/14/2019	73721	\$ 878.67
806	0607809400101029	ECLIPSE MEDICAL IMAGING PC	9/27/2019	NF-3 Bill Form / HCFA 1500 Form	8/12/2019	73718	\$ 901.42
807	0287216210101156	ECLIPSE MEDICAL IMAGING PC	9/27/2019	NF-3 Bill Form / HCFA 1500 Form	5/3/2019	73221	\$ 878.87
808	0287216210101156	ECLIPSE MEDICAL IMAGING PC	9/27/2019	NF-3 Bill Form / HCFA 1500 Form	3/28/2019	73721	\$ 678.67
809	0308342580101017	ECLIPSE MEDICAL IMAGING PC	9/27/2019	NF-3 Bill Form / HCFA 1500 Form	2/6/2019	73200	\$ 486.68
810	0533345150101025	ECLIPSE MEDICAL IMAGING PC	9/27/2019	NF-3 Bill Form / HCFA 1500 Form	7/11/2019	73221	\$ 878.67
811	0502121560101054	ECLIPSE MEDICAL IMAGING PC	9/30/2019	NF-3 Bill Form / HCFA 1500 Form	8/18/2019	70540	\$ 936.33
812	0502121560101054	ECLIPSE MEDICAL IMAGING PC	9/30/2019	NF-3 Bill Form / HCFA 1500 Form	8/15/2019	73221	\$ 659.00
813	0502121560101054	ECLIPSE MEDICAL IMAGING PC	9/30/2019	NF-3 Bill Form / HCFA 1500 Form	8/15/2019	72148	\$ 912.00
814	0111466580101128	ECLIPSE MEDICAL IMAGING PC	9/30/2019	NF-3 Bill Form / HCFA 1500 Form	8/16/2019	73221	\$ 878.67
815	0578741120101036	ECLIPSE MEDICAL IMAGING PC	9/30/2019	NF-3 Bill Form / HCFA 1500 Form	8/16/2019	73221	\$ 878.67
816	0477266980101043	ECLIPSE MEDICAL IMAGING PC	9/30/2019	NF-3 Bill Form / HCFA 1500 Form	8/18/2019	72146	\$ 959.61
817	0616599610101013	ECLIPSE MEDICAL IMAGING PC	9/30/2019	NF-3 Bill Form / HCFA 1500 Form	8/16/2019	72141	\$ 659.79
818	0616599610101013	ECLIPSE MEDICAL IMAGING PC	9/30/2019	NF-3 Bill Form / HCFA 1500 Form	8/16/2019	72148	\$ 912.00
819	0489546880101136	ECLIPSE MEDICAL IMAGING PC	9/30/2019	NF-3 Bill Form / HCFA 1500 Form	8/15/2019	70250	\$ 87.81
820	0638245780101011	ECLIPSE MEDICAL IMAGING PC	9/30/2019	NF-3 Bill Form / HCFA 1500 Form	8/15/2019	73221	\$ 878.67
821	0638245780101011	ECLIPSE MEDICAL IMAGING PC	9/30/2019	NF-3 Bill Form / HCFA 1500 Form	8/18/2019	73221	\$ 878.67
822	0502121560101054	ECLIPSE MEDICAL IMAGING PC	9/30/2019	NF-3 Bill Form / HCFA 1500 Form	8/19/2019	72141	\$ 879.73
823	0532745600101015	ECLIPSE MEDICAL IMAGING PC	9/30/2019	NF-3 Bill Form / HCFA 1500 Form	8/19/2019	73221	\$ 878.67
824	0580680300101034	ECLIPSE MEDICAL IMAGING PC	9/30/2019	NF-3 Bill Form / HCFA 1500 Form	8/18/2019	73721	\$ 878.67
825	0532745600101015	ECLIPSE MEDICAL IMAGING PC	9/30/2019	NF-3 Bill Form / HCFA 1500 Form	8/19/2019	72148	\$ 912.00
826	0655365870101016	ECLIPSE MEDICAL IMAGING PC	9/30/2019	NF-3 Bill Form / HCFA 1500 Form	8/19/2019	73221	\$ 878.67
827	0301689460101021	ECLIPSE MEDICAL IMAGING PC	9/30/2019	NF-3 Bill Form / HCFA 1500 Form	8/18/2019	73700	\$ 486.68
828	0301689460101021	ECLIPSE MEDICAL IMAGING PC	9/30/2019	NF-3 Bill Form / HCFA 1500 Form	8/18/2019	70450	\$ 341.60
829	0532745600101015	ECLIPSE MEDICAL IMAGING PC	9/30/2019	NF-3 Bill Form / HCFA 1500 Form	8/15/2019	73218	\$ 765.99
830	0655365870101016	ECLIPSE MEDICAL IMAGING PC	9/30/2019	NF-3 Bill Form / HCFA 1500 Form	8/19/2019	73221	\$ 878.67
831	0303534800101034	ECLIPSE MEDICAL IMAGING PC	9/30/2019	NF-3 Bill Form / HCFA 1500 Form	8/15/2019	72148	\$ 912.00
832	0553896440101014	ECLIPSE MEDICAL IMAGING PC	9/30/2019	NF-3 Bill Form / HCFA 1500 Form	8/19/2019	72148	\$ 912.00
833	0553896440101014	ECLIPSE MEDICAL IMAGING PC	9/30/2019	NF-3 Bill Form / HCFA 1500 Form	8/19/2019	73721	\$ 659.00
834	0532745600101015	ECLIPSE MEDICAL IMAGING PC	9/30/2019	NF-3 Bill Form / HCFA 1500 Form	8/15/2019	72070	\$ 69.82
835	0532745600101015	ECLIPSE MEDICAL IMAGING PC	9/30/2019	NF-3 Bill Form / HCFA 1500 Form	8/15/2019	72040	\$ 72.20
836	0532745600101015	ECLIPSE MEDICAL IMAGING PC	9/30/2019	NF-3 Bill Form / HCFA 1500 Form	8/15/2019	73721	\$ 878.67
837	0532745600101015	ECLIPSE MEDICAL IMAGING PC	9/30/2019	NF-3 Bill Form / HCFA 1500 Form	8/15/2019	72100	\$ 65.86
838	0663520520101010	ECLIPSE MEDICAL IMAGING PC	9/30/2019	NF-3 Bill Form / HCFA 1500 Form	8/18/2019	73221	\$ 878.67
839	0663520520101010	ECLIPSE MEDICAL IMAGING PC	9/30/2019	NF-3 Bill Form / HCFA 1500 Form	8/18/2019	73721	\$ 659.00
840	0361035020101027	ECLIPSE MEDICAL IMAGING PC	9/30/2019	NF-3 Bill Form / HCFA 1500 Form	8/16/2019	72148	\$ 912.00

Government Employees Insurance Company, et al v. Eclipse Medical Imaging, et al
Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
841	0361035020101027	ECLIPSE MEDICAL IMAGING PC	9/30/2019	NF-3 Bill Form / HCFA 1500 Form	8/16/2019	72141	\$ 659.79
842	0580680300101034	ECLIPSE MEDICAL IMAGING PC	9/30/2019	NF-3 Bill Form / HCFA 1500 Form	8/18/2019	73221	\$ 878.67
843	0361035020101027	ECLIPSE MEDICAL IMAGING PC	9/30/2019	NF-3 Bill Form / HCFA 1500 Form	8/18/2019	72148	\$ 912.00
844	0361035020101027	ECLIPSE MEDICAL IMAGING PC	9/30/2019	NF-3 Bill Form / HCFA 1500 Form	8/18/2019	72141	\$ 659.79
845	0607809400101029	ECLIPSE MEDICAL IMAGING PC	10/1/2019	NF-3 Bill Form / HCFA 1500 Form	8/16/2019	72148	\$ 912.00
846	0663792910101013	ECLIPSE MEDICAL IMAGING PC	10/7/2019	NF-3 Bill Form / HCFA 1500 Form	8/22/2019	73721	\$ 878.67
847	0291248910101065	ECLIPSE MEDICAL IMAGING PC	10/7/2019	NF-3 Bill Form / HCFA 1500 Form	8/20/2019	72100	\$ 65.86
848	0291248910101065	ECLIPSE MEDICAL IMAGING PC	10/7/2019	NF-3 Bill Form / HCFA 1500 Form	8/20/2019	72040	\$ 72.20
849	0291248910101065	ECLIPSE MEDICAL IMAGING PC	10/7/2019	NF-3 Bill Form / HCFA 1500 Form	8/20/2019	73721	\$ 878.67
850	0580680300101034	ECLIPSE MEDICAL IMAGING PC	10/7/2019	NF-3 Bill Form / HCFA 1500 Form	8/22/2019	73221	\$ 878.67
851	0301689460101021	ECLIPSE MEDICAL IMAGING PC	10/7/2019	NF-3 Bill Form / HCFA 1500 Form	8/20/2019	72131	\$ 436.42
852	0301689460101021	ECLIPSE MEDICAL IMAGING PC	10/7/2019	NF-3 Bill Form / HCFA 1500 Form	8/20/2019	72125	\$ 581.90
853	0444115460101017	ECLIPSE MEDICAL IMAGING PC	10/7/2019	NF-3 Bill Form / HCFA 1500 Form	8/22/2019	72070	\$ 93.10
854	0361035020101027	ECLIPSE MEDICAL IMAGING PC	10/7/2019	NF-3 Bill Form / HCFA 1500 Form	8/23/2019	72146	\$ 959.61
855	0580680300101034	ECLIPSE MEDICAL IMAGING PC	10/7/2019	NF-3 Bill Form / HCFA 1500 Form	8/20/2019	73221	\$ 659.00
856	0580680300101034	ECLIPSE MEDICAL IMAGING PC	10/7/2019	NF-3 Bill Form / HCFA 1500 Form	8/20/2019	72148	\$ 912.00
857	0233040660101051	ECLIPSE MEDICAL IMAGING PC	10/7/2019	NF-3 Bill Form / HCFA 1500 Form	8/20/2019	73221	\$ 878.67
858	0633411520101027	ECLIPSE MEDICAL IMAGING PC	10/7/2019	NF-3 Bill Form / HCFA 1500 Form	8/23/2019	73221	\$ 878.67
859	0502121560101054	ECLIPSE MEDICAL IMAGING PC	10/7/2019	NF-3 Bill Form / HCFA 1500 Form	8/23/2019	73221	\$ 878.67
860	0502121560101054	ECLIPSE MEDICAL IMAGING PC	10/7/2019	NF-3 Bill Form / HCFA 1500 Form	8/23/2019	70551	\$ 655.83
861	0580680300101034	ECLIPSE MEDICAL IMAGING PC	10/7/2019	NF-3 Bill Form / HCFA 1500 Form	8/22/2019	72141	\$ 879.73
862	0492754990101104	ECLIPSE MEDICAL IMAGING PC	10/7/2019	NF-3 Bill Form / HCFA 1500 Form	8/20/2019	73700	\$ 365.01
863	0492754990101104	ECLIPSE MEDICAL IMAGING PC	10/7/2019	NF-3 Bill Form / HCFA 1500 Form	8/20/2019	73221	\$ 878.67
864	0444115460101017	ECLIPSE MEDICAL IMAGING PC	10/7/2019	NF-3 Bill Form / HCFA 1500 Form	8/22/2019	72070	\$ 93.10
865	0444115460101017	ECLIPSE MEDICAL IMAGING PC	10/7/2019	NF-3 Bill Form / HCFA 1500 Form	8/22/2019	72100	\$ 65.86
866	0444115460101017	ECLIPSE MEDICAL IMAGING PC	10/7/2019	NF-3 Bill Form / HCFA 1500 Form	8/22/2019	73560	\$ 55.54
867	0498905640101043	ECLIPSE MEDICAL IMAGING PC	10/7/2019	NF-3 Bill Form / HCFA 1500 Form	8/21/2019	73221	\$ 659.00
868	0498905640101043	ECLIPSE MEDICAL IMAGING PC	10/7/2019	NF-3 Bill Form / HCFA 1500 Form	8/21/2019	72148	\$ 912.00
869	0444115460101017	ECLIPSE MEDICAL IMAGING PC	10/7/2019	NF-3 Bill Form / HCFA 1500 Form	8/22/2019	72040	\$ 96.27
870	0444115460101017	ECLIPSE MEDICAL IMAGING PC	10/7/2019	NF-3 Bill Form / HCFA 1500 Form	8/22/2019	72070	\$ 69.82
871	0663206370101017	ECLIPSE MEDICAL IMAGING PC	10/7/2019	NF-3 Bill Form / HCFA 1500 Form	8/22/2019	72131	\$ 436.42
872	0663206370101017	ECLIPSE MEDICAL IMAGING PC	10/7/2019	NF-3 Bill Form / HCFA 1500 Form	8/22/2019	72125	\$ 581.90
873	0609992270101036	ECLIPSE MEDICAL IMAGING PC	10/7/2019	NF-3 Bill Form / HCFA 1500 Form	8/20/2019	72148	\$ 912.00
874	0609992270101036	ECLIPSE MEDICAL IMAGING PC	10/7/2019	NF-3 Bill Form / HCFA 1500 Form	8/20/2019	72141	\$ 659.79
875	0477740760101019	ECLIPSE MEDICAL IMAGING PC	10/7/2019	NF-3 Bill Form / HCFA 1500 Form	8/25/2019	73221	\$ 878.67
876	0609992270101036	ECLIPSE MEDICAL IMAGING PC	10/7/2019	NF-3 Bill Form / HCFA 1500 Form	8/25/2019	73221	\$ 659.00
877	0609992270101036	ECLIPSE MEDICAL IMAGING PC	10/7/2019	NF-3 Bill Form / HCFA 1500 Form	8/25/2019	72146	\$ 959.61
878	0580680300101034	ECLIPSE MEDICAL IMAGING PC	10/7/2019	NF-3 Bill Form / HCFA 1500 Form	8/25/2019	72148	\$ 912.00
879	0635040750101023	ECLIPSE MEDICAL IMAGING PC	10/7/2019	NF-3 Bill Form / HCFA 1500 Form	8/20/2019	73721	\$ 878.67
880	0580680300101034	ECLIPSE MEDICAL IMAGING PC	10/7/2019	NF-3 Bill Form / HCFA 1500 Form	8/21/2019	73221	\$ 878.67
881	0470187060101026	ECLIPSE MEDICAL IMAGING PC	10/7/2019	NF-3 Bill Form / HCFA 1500 Form	8/22/2019	73221	\$ 878.67
882	0580680300101034	ECLIPSE MEDICAL IMAGING PC	10/7/2019	NF-3 Bill Form / HCFA 1500 Form	8/25/2019	72141	\$ 879.73
883	0430292920101022	ECLIPSE MEDICAL IMAGING PC	10/7/2019	NF-3 Bill Form / HCFA 1500 Form	8/25/2019	73221	\$ 878.67
884	0543702710101028	ECLIPSE MEDICAL IMAGING PC	9/20/2019	NF-3 Bill Form / HCFA 1500 Form	4/11/2019	72141	\$ 879.73
885	0287216210101230	ECLIPSE MEDICAL IMAGING PC	9/27/2019	NF-3 Bill Form / HCFA 1500 Form	5/3/2019	73221	\$ 878.67
886	0287216210101230	ECLIPSE MEDICAL IMAGING PC	9/27/2019	NF-3 Bill Form / HCFA 1500 Form	3/28/2019	73721	\$ 878.67
887	0430292920101022	ECLIPSE MEDICAL IMAGING PC	10/10/2019	NF-3 Bill Form / HCFA 1500 Form	8/27/2019	72148	\$ 912.00
888	0645749140101018	ECLIPSE MEDICAL IMAGING PC	10/10/2019	NF-3 Bill Form / HCFA 1500 Form	8/27/2019	72148	\$ 912.00
889	0578741120101036	ECLIPSE MEDICAL IMAGING PC	10/10/2019	NF-3 Bill Form / HCFA 1500 Form	8/27/2019	72141	\$ 879.73
890	0657113080101048	ECLIPSE MEDICAL IMAGING PC	10/10/2019	NF-3 Bill Form / HCFA 1500 Form	8/26/2019	72148	\$ 912.00
891	0657113080101048	ECLIPSE MEDICAL IMAGING PC	10/10/2019	NF-3 Bill Form / HCFA 1500 Form	8/26/2019	72141	\$ 659.79
892	0603620490101025	ECLIPSE MEDICAL IMAGING PC	10/10/2019	NF-3 Bill Form / HCFA 1500 Form	8/28/2019	72148	\$ 912.00
893	0411230320101021	ECLIPSE MEDICAL IMAGING PC	10/10/2019	NF-3 Bill Form / HCFA 1500 Form	8/26/2019	73221	\$ 878.67
894	0430292920101022	ECLIPSE MEDICAL IMAGING PC	10/10/2019	NF-3 Bill Form / HCFA 1500 Form	8/27/2019	72141	\$ 659.79
895	0430292920101022	ECLIPSE MEDICAL IMAGING PC	10/10/2019	NF-3 Bill Form / HCFA 1500 Form	8/27/2019	72148	\$ 912.00
896	0645749140101018	ECLIPSE MEDICAL IMAGING PC	10/10/2019	NF-3 Bill Form / HCFA 1500 Form	8/27/2019	72141	\$ 879.73
897	0578741120101036	ECLIPSE MEDICAL IMAGING PC	10/10/2019	NF-3 Bill Form / HCFA 1500 Form	8/26/2019	72141	\$ 659.79
898	0578741120101036	ECLIPSE MEDICAL IMAGING PC	10/10/2019	NF-3 Bill Form / HCFA 1500 Form	8/26/2019	72148	\$ 912.00
899	0042444310101084	ECLIPSE MEDICAL IMAGING PC	10/10/2019	NF-3 Bill Form / HCFA 1500 Form	8/27/2019	73721	\$ 878.67
900	0492754990101104	ECLIPSE MEDICAL IMAGING PC	10/10/2019	NF-3 Bill Form / HCFA 1500 Form	8/28/2019	72148	\$ 912.00
901	0492754990101104	ECLIPSE MEDICAL IMAGING PC	10/10/2019	NF-3 Bill Form / HCFA 1500 Form	8/28/2019	72141	\$ 659.79
902	0580680300101034	ECLIPSE MEDICAL IMAGING PC	10/10/2019	NF-3 Bill Form / HCFA 1500 Form	8/27/2019	72148	\$ 912.00
903	0580680300101034	ECLIPSE MEDICAL IMAGING PC	10/10/2019	NF-3 Bill Form / HCFA 1500 Form	8/27/2019	72141	\$ 659.79
904	0661860720101010	ECLIPSE MEDICAL IMAGING PC	10/10/2019	NF-3 Bill Form / HCFA 1500 Form	8/26/2019	72148	\$ 912.00
905	0580680300101034	ECLIPSE MEDICAL IMAGING PC	10/10/2019	NF-3 Bill Form / HCFA 1500 Form	8/28/2019	73721	\$ 659.00
906	0580680300101034	ECLIPSE MEDICAL IMAGING PC	10/10/2019	NF-3 Bill Form / HCFA 1500 Form	8/28/2019	72141	\$ 879.73
907	0603620490101025	ECLIPSE MEDICAL IMAGING PC	10/10/2019	NF-3 Bill Form / HCFA 1500 Form	8/28/2019	72148	\$ 912.00
908	0042444310101084	ECLIPSE MEDICAL IMAGING PC	10/11/2019	NF-3 Bill Form / HCFA 1500 Form	8/27/2019	72070	\$ 69.82
909	0042444310101084	ECLIPSE MEDICAL IMAGING PC	10/11/2019	NF-3 Bill Form / HCFA 1500 Form	8/27/2019	73221	\$ 878.67
910	0042444310101084	ECLIPSE MEDICAL IMAGING PC	10/11/2019	NF-3 Bill Form / HCFA 1500 Form	8/27/2019	72100	\$ 65.86

Government Employees Insurance Company, et al v. Eclipse Medical Imaging, et al
Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
911	0491414830101019	ECLIPSE MEDICAL IMAGING PC	10/11/2019	NF-3 Bill Form / HCFA 1500 Form	8/27/2019	73721	\$ 878.67
912	0248355300101086	ECLIPSE MEDICAL IMAGING PC	10/11/2019	NF-3 Bill Form / HCFA 1500 Form	8/27/2019	73221	\$ 878.67
913	0532745600101015	ECLIPSE MEDICAL IMAGING PC	10/11/2019	NF-3 Bill Form / HCFA 1500 Form	8/27/2019	73221	\$ 878.67
914	0663520520101010	ECLIPSE MEDICAL IMAGING PC	10/15/2019	NF-3 Bill Form / HCFA 1500 Form	8/29/2019	73221	\$ 659.00
915	0663520520101010	ECLIPSE MEDICAL IMAGING PC	10/15/2019	NF-3 Bill Form / HCFA 1500 Form	8/29/2019	72141	\$ 879.73
916	0489546880101136	ECLIPSE MEDICAL IMAGING PC	10/15/2019	NF-3 Bill Form / HCFA 1500 Form	9/3/2019	72148	\$ 912.00
917	0643779880101011	ECLIPSE MEDICAL IMAGING PC	10/15/2019	NF-3 Bill Form / HCFA 1500 Form	9/3/2019	72141	\$ 879.73
918	0580680300101034	ECLIPSE MEDICAL IMAGING PC	10/15/2019	NF-3 Bill Form / HCFA 1500 Form	8/30/2019	73721	\$ 659.00
919	0580680300101034	ECLIPSE MEDICAL IMAGING PC	10/15/2019	NF-3 Bill Form / HCFA 1500 Form	8/30/2019	72148	\$ 912.00
920	0042444310101084	ECLIPSE MEDICAL IMAGING PC	10/15/2019	NF-3 Bill Form / HCFA 1500 Form	8/30/2019	73721	\$ 878.67
921	0042444310101084	ECLIPSE MEDICAL IMAGING PC	10/15/2019	NF-3 Bill Form / HCFA 1500 Form	8/30/2019	73221	\$ 659.00
922	0477503660101210	ECLIPSE MEDICAL IMAGING PC	10/15/2019	NF-3 Bill Form / HCFA 1500 Form	8/30/2019	73721	\$ 878.67
923	0130825620101108	ECLIPSE MEDICAL IMAGING PC	10/15/2019	NF-3 Bill Form / HCFA 1500 Form	8/30/2019	72148	\$ 912.00
924	0130825620101108	ECLIPSE MEDICAL IMAGING PC	10/15/2019	NF-3 Bill Form / HCFA 1500 Form	8/30/2019	72141	\$ 659.79
925	0614273470101016	ECLIPSE MEDICAL IMAGING PC	10/15/2019	NF-3 Bill Form / HCFA 1500 Form	9/3/2019	71020	\$ 78.29
926	0663520520101010	ECLIPSE MEDICAL IMAGING PC	10/15/2019	NF-3 Bill Form / HCFA 1500 Form	9/3/2019	72148	\$ 912.00
927	065536870101016	ECLIPSE MEDICAL IMAGING PC	10/15/2019	NF-3 Bill Form / HCFA 1500 Form	8/30/2019	72146	\$ 959.61
928	0645749140101018	ECLIPSE MEDICAL IMAGING PC	10/15/2019	NF-3 Bill Form / HCFA 1500 Form	8/29/2019	73721	\$ 878.67
929	0655365870101016	ECLIPSE MEDICAL IMAGING PC	10/15/2019	NF-3 Bill Form / HCFA 1500 Form	8/29/2019	73721	\$ 878.67
930	0634522830101017	ECLIPSE MEDICAL IMAGING PC	10/16/2019	NF-3 Bill Form / HCFA 1500 Form	9/3/2019	72141	\$ 879.73
931	0539282560101010	ECLIPSE MEDICAL IMAGING PC	10/16/2019	NF-3 Bill Form / HCFA 1500 Form	9/1/2019	72148	\$ 912.00
932	0539282560101010	ECLIPSE MEDICAL IMAGING PC	10/16/2019	NF-3 Bill Form / HCFA 1500 Form	9/1/2019	72141	\$ 659.79
933	0176239210101046	ECLIPSE MEDICAL IMAGING PC	10/21/2019	NF-3 Bill Form / HCFA 1500 Form	9/6/2019	72141	\$ 879.73
934	0663292380101023	ECLIPSE MEDICAL IMAGING PC	10/21/2019	NF-3 Bill Form / HCFA 1500 Form	9/6/2019	73221	\$ 659.00
935	0663292380101023	ECLIPSE MEDICAL IMAGING PC	10/21/2019	NF-3 Bill Form / HCFA 1500 Form	9/6/2019	72148	\$ 912.00
936	0454150500101088	ECLIPSE MEDICAL IMAGING PC	10/21/2019	NF-3 Bill Form / HCFA 1500 Form	9/5/2019	73218	\$ 765.99
937	0042444310101084	ECLIPSE MEDICAL IMAGING PC	10/21/2019	NF-3 Bill Form / HCFA 1500 Form	9/5/2019	73221	\$ 878.67
938	0375988470101018	ECLIPSE MEDICAL IMAGING PC	10/21/2019	NF-3 Bill Form / HCFA 1500 Form	9/5/2019	73721	\$ 659.00
939	0375988470101018	ECLIPSE MEDICAL IMAGING PC	10/21/2019	NF-3 Bill Form / HCFA 1500 Form	9/5/2019	72141	\$ 879.73
940	0489546880101136	ECLIPSE MEDICAL IMAGING PC	10/21/2019	NF-3 Bill Form / HCFA 1500 Form	9/5/2019	72146	\$ 959.61
941	0570263340101025	ECLIPSE MEDICAL IMAGING PC	10/21/2019	NF-3 Bill Form / HCFA 1500 Form	8/6/2019	72141	\$ 659.79
942	0570263340101025	ECLIPSE MEDICAL IMAGING PC	10/21/2019	NF-3 Bill Form / HCFA 1500 Form	8/6/2019	72148	\$ 912.00
943	0663792910101013	ECLIPSE MEDICAL IMAGING PC	10/21/2019	NF-3 Bill Form / HCFA 1500 Form	9/5/2019	73030	\$ 71.02
944	0663792910101013	ECLIPSE MEDICAL IMAGING PC	10/21/2019	NF-3 Bill Form / HCFA 1500 Form	9/5/2019	72148	\$ 912.00
945	0663792910101013	ECLIPSE MEDICAL IMAGING PC	10/21/2019	NF-3 Bill Form / HCFA 1500 Form	9/5/2019	72141	\$ 659.79
946	0539282560101010	ECLIPSE MEDICAL IMAGING PC	10/21/2019	NF-3 Bill Form / HCFA 1500 Form	9/4/2019	72146	\$ 959.61
947	0664152150101019	ECLIPSE MEDICAL IMAGING PC	10/21/2019	NF-3 Bill Form / HCFA 1500 Form	9/6/2019	73721	\$ 878.67
948	0551523600101046	ECLIPSE MEDICAL IMAGING PC	10/21/2019	NF-3 Bill Form / HCFA 1500 Form	9/4/2019	72141	\$ 879.73
949	0483963370101037	ECLIPSE MEDICAL IMAGING PC	10/21/2019	NF-3 Bill Form / HCFA 1500 Form	9/5/2019	72141	\$ 879.73
950	0070875220101068	ECLIPSE MEDICAL IMAGING PC	10/21/2019	NF-3 Bill Form / HCFA 1500 Form	9/5/2019	72100	\$ 65.86
951	0070875220101068	ECLIPSE MEDICAL IMAGING PC	10/21/2019	NF-3 Bill Form / HCFA 1500 Form	9/5/2019	72040	\$ 72.20
952	0070875220101068	ECLIPSE MEDICAL IMAGING PC	10/21/2019	NF-3 Bill Form / HCFA 1500 Form	9/5/2019	73218	\$ 574.49
953	0070875220101068	ECLIPSE MEDICAL IMAGING PC	10/21/2019	NF-3 Bill Form / HCFA 1500 Form	9/5/2019	72070	\$ 69.82
954	0070875220101068	ECLIPSE MEDICAL IMAGING PC	10/21/2019	NF-3 Bill Form / HCFA 1500 Form	9/5/2019	73221	\$ 878.67
955	0627463600101030	ECLIPSE MEDICAL IMAGING PC	10/24/2019	NF-3 Bill Form / HCFA 1500 Form	9/9/2019	73721	\$ 878.67
956	0665550390101012	ECLIPSE MEDICAL IMAGING PC	10/24/2019	NF-3 Bill Form / HCFA 1500 Form	9/9/2019	72141	\$ 659.79
957	0665550390101012	ECLIPSE MEDICAL IMAGING PC	10/24/2019	NF-3 Bill Form / HCFA 1500 Form	9/9/2019	72148	\$ 912.00
958	0664152150101019	ECLIPSE MEDICAL IMAGING PC	10/24/2019	NF-3 Bill Form / HCFA 1500 Form	9/9/2019	72100	\$ 65.86
959	0664152150101019	ECLIPSE MEDICAL IMAGING PC	10/24/2019	NF-3 Bill Form / HCFA 1500 Form	9/9/2019	72040	\$ 96.27
960	0664152150101019	ECLIPSE MEDICAL IMAGING PC	10/24/2019	NF-3 Bill Form / HCFA 1500 Form	9/9/2019	72070	\$ 69.82
961	0580680300101034	ECLIPSE MEDICAL IMAGING PC	10/24/2019	NF-3 Bill Form / HCFA 1500 Form	9/10/2019	73221	\$ 878.67
962	0042444310101084	ECLIPSE MEDICAL IMAGING PC	10/24/2019	NF-3 Bill Form / HCFA 1500 Form	9/9/2019	72148	\$ 912.00
963	0042444310101084	ECLIPSE MEDICAL IMAGING PC	10/24/2019	NF-3 Bill Form / HCFA 1500 Form	9/9/2019	72040	\$ 72.20
964	0042444310101084	ECLIPSE MEDICAL IMAGING PC	10/24/2019	NF-3 Bill Form / HCFA 1500 Form	9/9/2019	72070	\$ 69.82
965	0042444310101084	ECLIPSE MEDICAL IMAGING PC	10/24/2019	NF-3 Bill Form / HCFA 1500 Form	9/9/2019	72141	\$ 659.79
966	0042444310101084	ECLIPSE MEDICAL IMAGING PC	10/24/2019	NF-3 Bill Form / HCFA 1500 Form	9/9/2019	72100	\$ 65.86
967	0070875220101068	ECLIPSE MEDICAL IMAGING PC	10/24/2019	NF-3 Bill Form / HCFA 1500 Form	9/10/2019	73721	\$ 878.67
968	0070875220101068	ECLIPSE MEDICAL IMAGING PC	10/24/2019	NF-3 Bill Form / HCFA 1500 Form	9/10/2019	73218	\$ 574.49
969	0536840370101060	ECLIPSE MEDICAL IMAGING PC	10/24/2019	NF-3 Bill Form / HCFA 1500 Form	9/9/2019	73721	\$ 878.67
970	0594636020101013	ECLIPSE MEDICAL IMAGING PC	10/24/2019	NF-3 Bill Form / HCFA 1500 Form	9/9/2019	72148	\$ 912.00
971	0415611130101044	ECLIPSE MEDICAL IMAGING PC	10/24/2019	NF-3 Bill Form / HCFA 1500 Form	9/9/2019	73221	\$ 878.67
972	0415611130101044	ECLIPSE MEDICAL IMAGING PC	10/24/2019	NF-3 Bill Form / HCFA 1500 Form	9/9/2019	73721	\$ 659.00
973	0663292380101023	ECLIPSE MEDICAL IMAGING PC	10/24/2019	NF-3 Bill Form / HCFA 1500 Form	9/9/2019	72141	\$ 879.73
974	0594636020101013	ECLIPSE MEDICAL IMAGING PC	10/24/2019	NF-3 Bill Form / HCFA 1500 Form	9/9/2019	72141	\$ 879.73
975	0502121560101054	ECLIPSE MEDICAL IMAGING PC	10/25/2019	NF-3 Bill Form / HCFA 1500 Form	9/9/2019	73221	\$ 878.67
976	0519630800101023	ECLIPSE MEDICAL IMAGING PC	10/24/2019	NF-3 Bill Form / HCFA 1500 Form	9/9/2019	72040	\$ 72.20
977	0519630800101023	ECLIPSE MEDICAL IMAGING PC	10/24/2019	NF-3 Bill Form / HCFA 1500 Form	9/9/2019	73221	\$ 878.67
978	0470187060101026	ECLIPSE MEDICAL IMAGING PC	10/24/2019	NF-3 Bill Form / HCFA 1500 Form	9/9/2019	72148	\$ 912.00
979	0470187060101026	ECLIPSE MEDICAL IMAGING PC	10/24/2019	NF-3 Bill Form / HCFA 1500 Form	9/9/2019	72141	\$ 659.79
980	0411230320101021	ECLIPSE MEDICAL IMAGING PC	10/25/2019	NF-3 Bill Form / HCFA 1500 Form	9/10/2019	72148	\$ 912.00

Government Employees Insurance Company, et al v. Eclipse Medical Imaging, et al
Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
981	0411230320101021	ECLIPSE MEDICAL IMAGING PC	10/25/2019	NF-3 Bill Form / HCFA 1500 Form	9/10/2019	72141	\$ 659.79
982	0625805990101047	ECLIPSE MEDICAL IMAGING PC	10/28/2019	NF-3 Bill Form / HCFA 1500 Form	9/3/2019	72141	\$ 659.79
983	0625805990101047	ECLIPSE MEDICAL IMAGING PC	10/28/2019	NF-3 Bill Form / HCFA 1500 Form	9/3/2019	72148	\$ 912.00
984	0444115460101017	ECLIPSE MEDICAL IMAGING PC	10/28/2019	NF-3 Bill Form / HCFA 1500 Form	9/15/2019	72141	\$ 879.73
985	0572204600101014	ECLIPSE MEDICAL IMAGING PC	10/28/2019	NF-3 Bill Form / HCFA 1500 Form	9/12/2019	72141	\$ 879.73
986	0572204600101014	ECLIPSE MEDICAL IMAGING PC	10/28/2019	NF-3 Bill Form / HCFA 1500 Form	9/12/2019	73721	\$ 659.00
987	0649774760101030	ECLIPSE MEDICAL IMAGING PC	10/28/2019	NF-3 Bill Form / HCFA 1500 Form	9/15/2019	73721	\$ 659.00
988	0649774760101030	ECLIPSE MEDICAL IMAGING PC	10/28/2019	NF-3 Bill Form / HCFA 1500 Form	9/15/2019	70450	\$ 341.60
989	0665550390101012	ECLIPSE MEDICAL IMAGING PC	10/28/2019	NF-3 Bill Form / HCFA 1500 Form	9/11/2019	73721	\$ 659.00
990	0665550390101012	ECLIPSE MEDICAL IMAGING PC	10/28/2019	NF-3 Bill Form / HCFA 1500 Form	9/11/2019	73221	\$ 878.67
991	0375988470101018	ECLIPSE MEDICAL IMAGING PC	10/28/2019	NF-3 Bill Form / HCFA 1500 Form	9/15/2019	72148	\$ 912.00
992	0375988470101018	ECLIPSE MEDICAL IMAGING PC	10/28/2019	NF-3 Bill Form / HCFA 1500 Form	9/15/2019	73721	\$ 659.00
993	0634522800101017	ECLIPSE MEDICAL IMAGING PC	10/28/2019	NF-3 Bill Form / HCFA 1500 Form	9/11/2019	72148	\$ 912.00
994	0667645700000001	ECLIPSE MEDICAL IMAGING PC	10/28/2019	NF-3 Bill Form / HCFA 1500 Form	9/13/2019	73721	\$ 878.67
995	0435434680101075	ECLIPSE MEDICAL IMAGING PC	10/28/2019	NF-3 Bill Form / HCFA 1500 Form	9/11/2019	73218	\$ 574.49
996	0435434680101075	ECLIPSE MEDICAL IMAGING PC	10/28/2019	NF-3 Bill Form / HCFA 1500 Form	9/11/2019	73221	\$ 878.67
997	0444115460101017	ECLIPSE MEDICAL IMAGING PC	10/28/2019	NF-3 Bill Form / HCFA 1500 Form	9/15/2019	73221	\$ 878.67
998	0519630800101023	ECLIPSE MEDICAL IMAGING PC	10/28/2019	NF-3 Bill Form / HCFA 1500 Form	9/12/2019	72141	\$ 879.73
999	0294945680101020	ECLIPSE MEDICAL IMAGING PC	10/28/2019	NF-3 Bill Form / HCFA 1500 Form	9/15/2019	72141	\$ 659.79
1000	0294945680101020	ECLIPSE MEDICAL IMAGING PC	10/28/2019	NF-3 Bill Form / HCFA 1500 Form	9/15/2019	71100	\$ 66.65
1001	0294945680101020	ECLIPSE MEDICAL IMAGING PC	10/28/2019	NF-3 Bill Form / HCFA 1500 Form	9/15/2019	72148	\$ 912.00
1002	0547374060101010	ECLIPSE MEDICAL IMAGING PC	10/28/2019	NF-3 Bill Form / HCFA 1500 Form	9/13/2019	72141	\$ 879.73
1003	0547374060101010	ECLIPSE MEDICAL IMAGING PC	10/28/2019	NF-3 Bill Form / HCFA 1500 Form	9/13/2019	73721	\$ 659.00
1004	0111466580101128	ECLIPSE MEDICAL IMAGING PC	10/28/2019	NF-3 Bill Form / HCFA 1500 Form	9/12/2019	72141	\$ 879.73
1005	0541916720101016	ECLIPSE MEDICAL IMAGING PC	10/28/2019	NF-3 Bill Form / HCFA 1500 Form	9/12/2019	72148	\$ 912.00
1006	0541916720101016	ECLIPSE MEDICAL IMAGING PC	10/28/2019	NF-3 Bill Form / HCFA 1500 Form	9/12/2019	72141	\$ 659.79
1007	0649774760101030	ECLIPSE MEDICAL IMAGING PC	10/28/2019	NF-3 Bill Form / HCFA 1500 Form	9/15/2019	70450	\$ 455.47
1008	0448761900101046	ECLIPSE MEDICAL IMAGING PC	10/28/2019	NF-3 Bill Form / HCFA 1500 Form	9/11/2019	73700	\$ 365.01
1009	0448761900101046	ECLIPSE MEDICAL IMAGING PC	10/28/2019	NF-3 Bill Form / HCFA 1500 Form	9/11/2019	73200	\$ 486.68
1010	0590472450101016	ECLIPSE MEDICAL IMAGING PC	10/28/2019	NF-3 Bill Form / HCFA 1500 Form	9/13/2019	72141	\$ 879.73
1011	0435434680101075	ECLIPSE MEDICAL IMAGING PC	10/31/2019	NF-3 Bill Form / HCFA 1500 Form	9/16/2019	73721	\$ 878.67
1012	0435434680101075	ECLIPSE MEDICAL IMAGING PC	10/31/2019	NF-3 Bill Form / HCFA 1500 Form	9/16/2019	73221	\$ 659.00
1013	0617273430101039	ECLIPSE MEDICAL IMAGING PC	11/1/2019	NF-3 Bill Form / HCFA 1500 Form	9/18/2019	73221	\$ 878.67
1014	0545421420101017	ECLIPSE MEDICAL IMAGING PC	11/1/2019	NF-3 Bill Form / HCFA 1500 Form	9/17/2019	73200	\$ 486.68
1015	0545421420101017	ECLIPSE MEDICAL IMAGING PC	11/1/2019	NF-3 Bill Form / HCFA 1500 Form	9/17/2019	73700	\$ 365.01
1016	0545421420101017	ECLIPSE MEDICAL IMAGING PC	11/1/2019	NF-3 Bill Form / HCFA 1500 Form	9/17/2019	72040	\$ 72.20
1017	0545421420101017	ECLIPSE MEDICAL IMAGING PC	11/1/2019	NF-3 Bill Form / HCFA 1500 Form	9/17/2019	72070	\$ 69.82
1018	0545421420101017	ECLIPSE MEDICAL IMAGING PC	11/1/2019	NF-3 Bill Form / HCFA 1500 Form	9/17/2019	72100	\$ 65.86
1019	0448761900101046	ECLIPSE MEDICAL IMAGING PC	11/1/2019	NF-3 Bill Form / HCFA 1500 Form	9/18/2019	72070	\$ 69.82
1020	0448761900101046	ECLIPSE MEDICAL IMAGING PC	11/1/2019	NF-3 Bill Form / HCFA 1500 Form	9/18/2019	72100	\$ 65.86
1021	0448761900101046	ECLIPSE MEDICAL IMAGING PC	11/1/2019	NF-3 Bill Form / HCFA 1500 Form	9/18/2019	72040	\$ 72.20
1022	0448761900101046	ECLIPSE MEDICAL IMAGING PC	11/1/2019	NF-3 Bill Form / HCFA 1500 Form	9/18/2019	72131	\$ 581.90
1023	0448761900101046	ECLIPSE MEDICAL IMAGING PC	11/1/2019	NF-3 Bill Form / HCFA 1500 Form	9/18/2019	72125	\$ 436.42
1024	0511451890101014	ECLIPSE MEDICAL IMAGING PC	11/1/2019	NF-3 Bill Form / HCFA 1500 Form	9/18/2019	73221	\$ 878.67
1025	0435434680101075	ECLIPSE MEDICAL IMAGING PC	11/1/2019	NF-3 Bill Form / HCFA 1500 Form	9/17/2019	73221	\$ 878.67
1026	0477503660101210	ECLIPSE MEDICAL IMAGING PC	11/4/2019	NF-3 Bill Form / HCFA 1500 Form	9/22/2019	72148	\$ 912.00
1027	0663206370101017	ECLIPSE MEDICAL IMAGING PC	11/4/2019	NF-3 Bill Form / HCFA 1500 Form	9/22/2019	72141	\$ 659.79
1028	0663206370101017	ECLIPSE MEDICAL IMAGING PC	11/4/2019	NF-3 Bill Form / HCFA 1500 Form	9/22/2019	72148	\$ 912.00
1029	0649774760101030	ECLIPSE MEDICAL IMAGING PC	11/4/2019	NF-3 Bill Form / HCFA 1500 Form	9/20/2019	73221	\$ 878.67
1030	0477503660101210	ECLIPSE MEDICAL IMAGING PC	11/4/2019	NF-3 Bill Form / HCFA 1500 Form	9/19/2019	72141	\$ 879.73
1031	0477503660101210	ECLIPSE MEDICAL IMAGING PC	11/4/2019	NF-3 Bill Form / HCFA 1500 Form	9/19/2019	73721	\$ 659.00
1032	0405604190101056	ECLIPSE MEDICAL IMAGING PC	11/4/2019	NF-3 Bill Form / HCFA 1500 Form	9/19/2019	73721	\$ 878.67
1033	0415611130101044	ECLIPSE MEDICAL IMAGING PC	11/4/2019	NF-3 Bill Form / HCFA 1500 Form	9/19/2019	72148	\$ 912.00
1034	0415611130101044	ECLIPSE MEDICAL IMAGING PC	11/4/2019	NF-3 Bill Form / HCFA 1500 Form	9/19/2019	72141	\$ 659.79
1035	0661992260000001	ECLIPSE MEDICAL IMAGING PC	11/4/2019	NF-3 Bill Form / HCFA 1500 Form	9/20/2019	73721	\$ 878.67
1036	0435434680101075	ECLIPSE MEDICAL IMAGING PC	11/4/2019	NF-3 Bill Form / HCFA 1500 Form	9/18/2019	72070	\$ 69.82
1037	0435434680101075	ECLIPSE MEDICAL IMAGING PC	11/4/2019	NF-3 Bill Form / HCFA 1500 Form	9/18/2019	73221	\$ 878.67
1038	0435434680101075	ECLIPSE MEDICAL IMAGING PC	11/4/2019	NF-3 Bill Form / HCFA 1500 Form	9/18/2019	72100	\$ 65.86
1039	0435434680101075	ECLIPSE MEDICAL IMAGING PC	11/4/2019	NF-3 Bill Form / HCFA 1500 Form	9/18/2019	72040	\$ 72.20
1040	0649774760101030	ECLIPSE MEDICAL IMAGING PC	11/4/2019	NF-3 Bill Form / HCFA 1500 Form	9/22/2019	73221	\$ 878.67
1041	0649774760101030	ECLIPSE MEDICAL IMAGING PC	11/4/2019	NF-3 Bill Form / HCFA 1500 Form	9/22/2019	72148	\$ 912.00
1042	0294945680101020	ECLIPSE MEDICAL IMAGING PC	11/4/2019	NF-3 Bill Form / HCFA 1500 Form	9/19/2019	72146	\$ 959.61
1043	0303648870101038	ECLIPSE MEDICAL IMAGING PC	11/4/2019	NF-3 Bill Form / HCFA 1500 Form	9/19/2019	73721	\$ 878.67
1044	0545421420101017	ECLIPSE MEDICAL IMAGING PC	11/4/2019	NF-3 Bill Form / HCFA 1500 Form	9/19/2019	72131	\$ 436.42
1045	0545421420101017	ECLIPSE MEDICAL IMAGING PC	11/4/2019	NF-3 Bill Form / HCFA 1500 Form	9/19/2019	72125	\$ 581.90
1046	0645941920101017	ECLIPSE MEDICAL IMAGING PC	11/4/2019	NF-3 Bill Form / HCFA 1500 Form	9/19/2019	72141	\$ 879.73
1047	0665461260101020	ECLIPSE MEDICAL IMAGING PC	11/4/2019	NF-3 Bill Form / HCFA 1500 Form	9/20/2019	73721	\$ 878.67
1048	0563354350101011	ECLIPSE MEDICAL IMAGING PC	11/4/2019	NF-3 Bill Form / HCFA 1500 Form	9/20/2019	72141	\$ 879.73
1049	0649774760101030	ECLIPSE MEDICAL IMAGING PC	11/4/2019	NF-3 Bill Form / HCFA 1500 Form	9/20/2019	72141	\$ 879.73
1050	0489546880101136	ECLIPSE MEDICAL IMAGING PC	11/4/2019	NF-3 Bill Form / HCFA 1500 Form	9/18/2019	73721	\$ 878.67

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Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
1051	0489546880101136	ECLIPSE MEDICAL IMAGING PC	11/4/2019	NF-3 Bill Form / HCFA 1500 Form	9/18/2019	73221	\$ 659.00
1052	0663292380101023	ECLIPSE MEDICAL IMAGING PC	11/4/2019	NF-3 Bill Form / HCFA 1500 Form	9/22/2019	72146	\$ 959.61
1053	0303648870101038	ECLIPSE MEDICAL IMAGING PC	11/7/2019	NF-3 Bill Form / HCFA 1500 Form	9/23/2019	73221	\$ 878.67
1054	0303648870101038	ECLIPSE MEDICAL IMAGING PC	11/7/2019	NF-3 Bill Form / HCFA 1500 Form	9/24/2019	73718	\$ 901.42
1055	0545421420101017	ECLIPSE MEDICAL IMAGING PC	11/7/2019	NF-3 Bill Form / HCFA 1500 Form	9/23/2019	72128	\$ 581.90
1056	0635789020101011	ECLIPSE MEDICAL IMAGING PC	11/7/2019	NF-3 Bill Form / HCFA 1500 Form	9/24/2019	73221	\$ 878.67
1057	0320230710101095	ECLIPSE MEDICAL IMAGING PC	11/8/2019	NF-3 Bill Form / HCFA 1500 Form	9/23/2019	72040	\$ 72.20
1058	0320230710101095	ECLIPSE MEDICAL IMAGING PC	11/8/2019	NF-3 Bill Form / HCFA 1500 Form	9/23/2019	72100	\$ 65.86
1059	0320230710101095	ECLIPSE MEDICAL IMAGING PC	11/8/2019	NF-3 Bill Form / HCFA 1500 Form	9/23/2019	72070	\$ 69.82
1060	0320230710101095	ECLIPSE MEDICAL IMAGING PC	11/8/2019	NF-3 Bill Form / HCFA 1500 Form	9/23/2019	73721	\$ 878.67
1061	0320230710101095	ECLIPSE MEDICAL IMAGING PC	11/8/2019	NF-3 Bill Form / HCFA 1500 Form	9/23/2019	73221	\$ 878.67
1062	0320230710101095	ECLIPSE MEDICAL IMAGING PC	11/8/2019	NF-3 Bill Form / HCFA 1500 Form	9/23/2019	72040	\$ 72.20
1063	0320230710101095	ECLIPSE MEDICAL IMAGING PC	11/8/2019	NF-3 Bill Form / HCFA 1500 Form	9/23/2019	73030	\$ 71.02
1064	0592563640000001	ECLIPSE MEDICAL IMAGING PC	11/8/2019	NF-3 Bill Form / HCFA 1500 Form	9/24/2019	72040	\$ 96.27
1065	0592563640000001	ECLIPSE MEDICAL IMAGING PC	11/8/2019	NF-3 Bill Form / HCFA 1500 Form	9/24/2019	72100	\$ 65.86
1066	0592563640000001	ECLIPSE MEDICAL IMAGING PC	11/8/2019	NF-3 Bill Form / HCFA 1500 Form	9/24/2019	72070	\$ 69.82
1067	0592563640000001	ECLIPSE MEDICAL IMAGING PC	11/8/2019	NF-3 Bill Form / HCFA 1500 Form	9/24/2019	73070	\$ 52.77
1068	0592563640000001	ECLIPSE MEDICAL IMAGING PC	11/8/2019	NF-3 Bill Form / HCFA 1500 Form	9/24/2019	73560	\$ 55.54
1069	0649774760101030	ECLIPSE MEDICAL IMAGING PC	11/8/2019	NF-3 Bill Form / HCFA 1500 Form	9/24/2019	72141	\$ 879.73
1070	0533345150101025	ECLIPSE MEDICAL IMAGING PC	11/1/2019	NF-3 Bill Form / HCFA 1500 Form	7/11/2019	73221	\$ 878.67
1071	0588702780101041	ECLIPSE MEDICAL IMAGING PC	11/11/2019	NF-3 Bill Form / HCFA 1500 Form	9/26/2019	72070	\$ 69.82
1072	0588702780101041	ECLIPSE MEDICAL IMAGING PC	11/11/2019	NF-3 Bill Form / HCFA 1500 Form	9/26/2019	72100	\$ 65.86
1073	0588702780101041	ECLIPSE MEDICAL IMAGING PC	11/11/2019	NF-3 Bill Form / HCFA 1500 Form	9/26/2019	72040	\$ 96.27
1074	0179718140101158	ECLIPSE MEDICAL IMAGING PC	11/11/2019	NF-3 Bill Form / HCFA 1500 Form	9/27/2019	73221	\$ 659.00
1075	0179718140101158	ECLIPSE MEDICAL IMAGING PC	11/11/2019	NF-3 Bill Form / HCFA 1500 Form	9/27/2019	73718	\$ 901.42
1076	0405604190101056	ECLIPSE MEDICAL IMAGING PC	11/11/2019	NF-3 Bill Form / HCFA 1500 Form	9/26/2019	73721	\$ 878.67
1077	0379233190101140	ECLIPSE MEDICAL IMAGING PC	11/11/2019	NF-3 Bill Form / HCFA 1500 Form	9/26/2019	71250	\$ 518.42
1078	0379233190101140	ECLIPSE MEDICAL IMAGING PC	11/11/2019	NF-3 Bill Form / HCFA 1500 Form	9/26/2019	73510	\$ 62.68
1079	0562587840101049	ECLIPSE MEDICAL IMAGING PC	11/11/2019	NF-3 Bill Form / HCFA 1500 Form	9/26/2019	72040	\$ 96.27
1080	0562587840101049	ECLIPSE MEDICAL IMAGING PC	11/11/2019	NF-3 Bill Form / HCFA 1500 Form	9/26/2019	72100	\$ 65.86
1081	0562587840101049	ECLIPSE MEDICAL IMAGING PC	11/11/2019	NF-3 Bill Form / HCFA 1500 Form	9/26/2019	73030	\$ 71.02
1082	0562587840101049	ECLIPSE MEDICAL IMAGING PC	11/11/2019	NF-3 Bill Form / HCFA 1500 Form	9/26/2019	72040	\$ 96.27
1083	0562587840101049	ECLIPSE MEDICAL IMAGING PC	11/11/2019	NF-3 Bill Form / HCFA 1500 Form	9/26/2019	72100	\$ 65.86
1084	0562587840101049	ECLIPSE MEDICAL IMAGING PC	11/11/2019	NF-3 Bill Form / HCFA 1500 Form	9/26/2019	73120	\$ 47.61
1085	0511451890101014	ECLIPSE MEDICAL IMAGING PC	11/11/2019	NF-3 Bill Form / HCFA 1500 Form	9/25/2019	72141	\$ 659.79
1086	0511451890101014	ECLIPSE MEDICAL IMAGING PC	11/11/2019	NF-3 Bill Form / HCFA 1500 Form	9/25/2019	72148	\$ 912.00
1087	0612034050101047	ECLIPSE MEDICAL IMAGING PC	11/11/2019	NF-3 Bill Form / HCFA 1500 Form	9/24/2019	73721	\$ 878.67
1088	0320230710101095	ECLIPSE MEDICAL IMAGING PC	11/11/2019	NF-3 Bill Form / HCFA 1500 Form	9/25/2019	72148	\$ 912.00
1089	0645749140101018	ECLIPSE MEDICAL IMAGING PC	11/12/2019	NF-3 Bill Form / HCFA 1500 Form	9/30/2019	73721	\$ 878.67
1090	0007442270101387	ECLIPSE MEDICAL IMAGING PC	11/12/2019	NF-3 Bill Form / HCFA 1500 Form	10/1/2019	72100	\$ 65.86
1091	0007442270101387	ECLIPSE MEDICAL IMAGING PC	11/12/2019	NF-3 Bill Form / HCFA 1500 Form	10/1/2019	73560	\$ 55.54
1092	0007442270101387	ECLIPSE MEDICAL IMAGING PC	11/12/2019	NF-3 Bill Form / HCFA 1500 Form	10/1/2019	73030	\$ 71.02
1093	0007442270101387	ECLIPSE MEDICAL IMAGING PC	11/12/2019	NF-3 Bill Form / HCFA 1500 Form	10/1/2019	73560	\$ 55.54
1094	0007442270101387	ECLIPSE MEDICAL IMAGING PC	11/12/2019	NF-3 Bill Form / HCFA 1500 Form	10/1/2019	73030	\$ 71.02
1095	0007442270101387	ECLIPSE MEDICAL IMAGING PC	11/12/2019	NF-3 Bill Form / HCFA 1500 Form	10/1/2019	72040	\$ 96.27
1096	0444115460101017	ECLIPSE MEDICAL IMAGING PC	11/12/2019	NF-3 Bill Form / HCFA 1500 Form	9/20/2019	72146	\$ 959.61
1097	0444115460101017	ECLIPSE MEDICAL IMAGING PC	11/12/2019	NF-3 Bill Form / HCFA 1500 Form	9/20/2019	73221	\$ 659.00
1098	0591061270101031	ECLIPSE MEDICAL IMAGING PC	11/11/2019	NF-3 Bill Form / HCFA 1500 Form	9/26/2019	73721	\$ 878.67
1099	0562587840101049	ECLIPSE MEDICAL IMAGING PC	11/11/2019	NF-3 Bill Form / HCFA 1500 Form	9/26/2019	72100	\$ 65.86
1100	0562587840101049	ECLIPSE MEDICAL IMAGING PC	11/11/2019	NF-3 Bill Form / HCFA 1500 Form	9/26/2019	73560	\$ 55.54
1101	0562587840101049	ECLIPSE MEDICAL IMAGING PC	11/11/2019	NF-3 Bill Form / HCFA 1500 Form	9/26/2019	73030	\$ 71.02
1102	0562587840101049	ECLIPSE MEDICAL IMAGING PC	11/11/2019	NF-3 Bill Form / HCFA 1500 Form	9/26/2019	72040	\$ 96.27
1103	0645749140101018	ECLIPSE MEDICAL IMAGING PC	11/12/2019	NF-3 Bill Form / HCFA 1500 Form	9/30/2019	73221	\$ 878.67
1104	0070875220101068	ECLIPSE MEDICAL IMAGING PC	11/12/2019	NF-3 Bill Form / HCFA 1500 Form	10/1/2019	72148	\$ 912.00
1105	0612034050101047	ECLIPSE MEDICAL IMAGING PC	11/12/2019	NF-3 Bill Form / HCFA 1500 Form	9/30/2019	73221	\$ 878.67
1106	0179718140101158	ECLIPSE MEDICAL IMAGING PC	11/12/2019	NF-3 Bill Form / HCFA 1500 Form	9/25/2019	73721	\$ 878.67
1107	0179718140101158	ECLIPSE MEDICAL IMAGING PC	11/12/2019	NF-3 Bill Form / HCFA 1500 Form	9/25/2019	72100	\$ 65.86
1108	0179718140101158	ECLIPSE MEDICAL IMAGING PC	11/12/2019	NF-3 Bill Form / HCFA 1500 Form	9/25/2019	73221	\$ 659.00
1109	0179718140101158	ECLIPSE MEDICAL IMAGING PC	11/12/2019	NF-3 Bill Form / HCFA 1500 Form	9/25/2019	72040	\$ 72.20
1110	0179718140101158	ECLIPSE MEDICAL IMAGING PC	11/12/2019	NF-3 Bill Form / HCFA 1500 Form	9/25/2019	72070	\$ 69.82
1111	0483963370101037	ECLIPSE MEDICAL IMAGING PC	11/12/2019	NF-3 Bill Form / HCFA 1500 Form	10/1/2019	73221	\$ 878.67
1112	0668552440000001	ECLIPSE MEDICAL IMAGING PC	11/14/2019	NF-3 Bill Form / HCFA 1500 Form	10/1/2019	73721	\$ 878.67
1113	0389342160000001	ECLIPSE MEDICAL IMAGING PC	11/14/2019	NF-3 Bill Form / HCFA 1500 Form	10/1/2019	73221	\$ 878.67
1114	0389342160000001	ECLIPSE MEDICAL IMAGING PC	11/14/2019	NF-3 Bill Form / HCFA 1500 Form	10/1/2019	73070	\$ 52.77
1115	0389342160000001	ECLIPSE MEDICAL IMAGING PC	11/14/2019	NF-3 Bill Form / HCFA 1500 Form	10/1/2019	71100	\$ 66.65
1116	0544775790000001	ECLIPSE MEDICAL IMAGING PC	11/14/2019	NF-3 Bill Form / HCFA 1500 Form	10/1/2019	72040	\$ 72.20
1117	0544775790000001	ECLIPSE MEDICAL IMAGING PC	11/14/2019	NF-3 Bill Form / HCFA 1500 Form	10/1/2019	73221	\$ 878.67
1118	0544775790000001	ECLIPSE MEDICAL IMAGING PC	11/14/2019	NF-3 Bill Form / HCFA 1500 Form	10/1/2019	72070	\$ 69.82
1119	0544775790000001	ECLIPSE MEDICAL IMAGING PC	11/14/2019	NF-3 Bill Form / HCFA 1500 Form	10/1/2019	72100	\$ 65.86
1120	0661992260000001	ECLIPSE MEDICAL IMAGING PC	11/15/2019	NF-3 Bill Form / HCFA 1500 Form	9/27/2019	73218	\$ 765.99

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Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
1121	0662270950000001	ECLIPSE MEDICAL IMAGING PC	11/18/2019	NF-3 Bill Form / HCFA 1500 Form	10/2/2019	72148	\$ 912.00
1122	0661388280101015	ECLIPSE MEDICAL IMAGING PC	11/18/2019	NF-3 Bill Form / HCFA 1500 Form	10/3/2019	72070	\$ 69.82
1123	0661388280101015	ECLIPSE MEDICAL IMAGING PC	11/18/2019	NF-3 Bill Form / HCFA 1500 Form	10/3/2019	72100	\$ 65.86
1124	0661388280101015	ECLIPSE MEDICAL IMAGING PC	11/18/2019	NF-3 Bill Form / HCFA 1500 Form	10/3/2019	73721	\$ 878.67
1125	0661388280101015	ECLIPSE MEDICAL IMAGING PC	11/18/2019	NF-3 Bill Form / HCFA 1500 Form	10/3/2019	72040	\$ 72.20
1126	0617273430101039	ECLIPSE MEDICAL IMAGING PC	11/18/2019	NF-3 Bill Form / HCFA 1500 Form	10/2/2019	72141	\$ 659.79
1127	0617273430101039	ECLIPSE MEDICAL IMAGING PC	11/18/2019	NF-3 Bill Form / HCFA 1500 Form	10/2/2019	72148	\$ 912.00
1128	0668419120000002	ECLIPSE MEDICAL IMAGING PC	11/18/2019	NF-3 Bill Form / HCFA 1500 Form	10/3/2019	73721	\$ 878.67
1129	0666672890101018	ECLIPSE MEDICAL IMAGING PC	11/18/2019	NF-3 Bill Form / HCFA 1500 Form	10/4/2019	73718	\$ 901.42
1130	0666672890101018	ECLIPSE MEDICAL IMAGING PC	11/18/2019	NF-3 Bill Form / HCFA 1500 Form	10/4/2019	73718	\$ 676.06
1131	0435434680101075	ECLIPSE MEDICAL IMAGING PC	11/18/2019	NF-3 Bill Form / HCFA 1500 Form	10/4/2019	72148	\$ 912.00
1132	0435434680101075	ECLIPSE MEDICAL IMAGING PC	11/18/2019	NF-3 Bill Form / HCFA 1500 Form	10/4/2019	72141	\$ 659.79
1133	0620510630101037	ECLIPSE MEDICAL IMAGING PC	11/18/2019	NF-3 Bill Form / HCFA 1500 Form	10/3/2019	73070	\$ 52.77
1134	0620510630101037	ECLIPSE MEDICAL IMAGING PC	11/18/2019	NF-3 Bill Form / HCFA 1500 Form	10/3/2019	73120	\$ 47.61
1135	0620510630101037	ECLIPSE MEDICAL IMAGING PC	11/18/2019	NF-3 Bill Form / HCFA 1500 Form	10/3/2019	73221	\$ 878.67
1136	0620510630101037	ECLIPSE MEDICAL IMAGING PC	11/18/2019	NF-3 Bill Form / HCFA 1500 Form	10/3/2019	70450	\$ 341.60
1137	0620510630101037	ECLIPSE MEDICAL IMAGING PC	11/18/2019	NF-3 Bill Form / HCFA 1500 Form	10/3/2019	73140	\$ 40.06
1138	0176239210101046	ECLIPSE MEDICAL IMAGING PC	11/18/2019	NF-3 Bill Form / HCFA 1500 Form	10/1/2019	73120	\$ 47.61
1139	0176239210101046	ECLIPSE MEDICAL IMAGING PC	11/18/2019	NF-3 Bill Form / HCFA 1500 Form	10/1/2019	73218	\$ 574.49
1140	0176239210101046	ECLIPSE MEDICAL IMAGING PC	11/18/2019	NF-3 Bill Form / HCFA 1500 Form	10/1/2019	73100	\$ 46.42
1141	0176239210101046	ECLIPSE MEDICAL IMAGING PC	11/18/2019	NF-3 Bill Form / HCFA 1500 Form	10/1/2019	73221	\$ 878.67
1142	0617273430101039	ECLIPSE MEDICAL IMAGING PC	11/18/2019	NF-3 Bill Form / HCFA 1500 Form	10/6/2019	72141	\$ 659.79
1143	0617273430101039	ECLIPSE MEDICAL IMAGING PC	11/18/2019	NF-3 Bill Form / HCFA 1500 Form	10/6/2019	72148	\$ 912.00
1144	0617273430101039	ECLIPSE MEDICAL IMAGING PC	11/18/2019	NF-3 Bill Form / HCFA 1500 Form	10/6/2019	73560	\$ 55.54
1145	0375988470101018	ECLIPSE MEDICAL IMAGING PC	11/18/2019	NF-3 Bill Form / HCFA 1500 Form	10/6/2019	73721	\$ 878.67
1146	0352494380101097	ECLIPSE MEDICAL IMAGING PC	11/18/2019	NF-3 Bill Form / HCFA 1500 Form	10/3/2019	73070	\$ 52.77
1147	0352494380101097	ECLIPSE MEDICAL IMAGING PC	11/18/2019	NF-3 Bill Form / HCFA 1500 Form	10/3/2019	73100	\$ 46.42
1148	0352494380101097	ECLIPSE MEDICAL IMAGING PC	11/18/2019	NF-3 Bill Form / HCFA 1500 Form	10/3/2019	73221	\$ 878.67
1149	0352494380101097	ECLIPSE MEDICAL IMAGING PC	11/18/2019	NF-3 Bill Form / HCFA 1500 Form	10/3/2019	73120	\$ 47.61
1150	0432971290101104	ECLIPSE MEDICAL IMAGING PC	11/18/2019	NF-3 Bill Form / HCFA 1500 Form	10/4/2019	73721	\$ 659.00
1151	0432971290101104	ECLIPSE MEDICAL IMAGING PC	11/18/2019	NF-3 Bill Form / HCFA 1500 Form	10/4/2019	73221	\$ 878.67
1152	0590472450101016	ECLIPSE MEDICAL IMAGING PC	11/18/2019	NF-3 Bill Form / HCFA 1500 Form	10/6/2019	72148	\$ 912.00
1153	0662955430000001	ECLIPSE MEDICAL IMAGING PC	11/21/2019	NF-3 Bill Form / HCFA 1500 Form	10/7/2019	73721	\$ 878.67
1154	0664152150101019	ECLIPSE MEDICAL IMAGING PC	11/21/2019	NF-3 Bill Form / HCFA 1500 Form	10/7/2019	72141	\$ 659.79
1155	0664152150101019	ECLIPSE MEDICAL IMAGING PC	11/21/2019	NF-3 Bill Form / HCFA 1500 Form	10/7/2019	72148	\$ 912.00
1156	0633292200000001	ECLIPSE MEDICAL IMAGING PC	11/21/2019	NF-3 Bill Form / HCFA 1500 Form	10/7/2019	73221	\$ 659.00
1157	0633292200000001	ECLIPSE MEDICAL IMAGING PC	11/21/2019	NF-3 Bill Form / HCFA 1500 Form	10/7/2019	73718	\$ 901.42
1158	0571857590101038	ECLIPSE MEDICAL IMAGING PC	11/21/2019	NF-3 Bill Form / HCFA 1500 Form	10/7/2019	71020	\$ 78.29
1159	0402178090101013	ECLIPSE MEDICAL IMAGING PC	11/21/2019	NF-3 Bill Form / HCFA 1500 Form	10/7/2019	72131	\$ 581.90
1160	0179718140101158	ECLIPSE MEDICAL IMAGING PC	11/25/2019	NF-3 Bill Form / HCFA 1500 Form	10/11/2019	73718	\$ 901.42
1161	0179718140101158	ECLIPSE MEDICAL IMAGING PC	11/25/2019	NF-3 Bill Form / HCFA 1500 Form	10/11/2019	73721	\$ 878.67
1162	0309181510000001	ECLIPSE MEDICAL IMAGING PC	11/25/2019	NF-3 Bill Form / HCFA 1500 Form	10/13/2019	73721	\$ 659.00
1163	0309181510000001	ECLIPSE MEDICAL IMAGING PC	11/25/2019	NF-3 Bill Form / HCFA 1500 Form	10/13/2019	72100	\$ 65.86
1164	0309181510000001	ECLIPSE MEDICAL IMAGING PC	11/25/2019	NF-3 Bill Form / HCFA 1500 Form	10/13/2019	73721	\$ 878.67
1165	0309181510000001	ECLIPSE MEDICAL IMAGING PC	11/25/2019	NF-3 Bill Form / HCFA 1500 Form	10/13/2019	72070	\$ 69.82
1166	0309181510000001	ECLIPSE MEDICAL IMAGING PC	11/25/2019	NF-3 Bill Form / HCFA 1500 Form	10/13/2019	72040	\$ 72.20
1167	0590218200101017	ECLIPSE MEDICAL IMAGING PC	11/25/2019	NF-3 Bill Form / HCFA 1500 Form	10/11/2019	72148	\$ 912.00
1168	0555478920101125	ECLIPSE MEDICAL IMAGING PC	11/25/2019	NF-3 Bill Form / HCFA 1500 Form	10/11/2019	72148	\$ 912.00
1169	0555478920101125	ECLIPSE MEDICAL IMAGING PC	11/25/2019	NF-3 Bill Form / HCFA 1500 Form	10/11/2019	72141	\$ 659.79
1170	0389342160000001	ECLIPSE MEDICAL IMAGING PC	11/25/2019	NF-3 Bill Form / HCFA 1500 Form	10/13/2019	72141	\$ 879.73
1171	0409863850000001	ECLIPSE MEDICAL IMAGING PC	11/25/2019	NF-3 Bill Form / HCFA 1500 Form	10/13/2019	73721	\$ 878.67
1172	0170269950101382	ECLIPSE MEDICAL IMAGING PC	11/25/2019	NF-3 Bill Form / HCFA 1500 Form	10/10/2019	72100	\$ 85.86
1173	0170269950101382	ECLIPSE MEDICAL IMAGING PC	11/25/2019	NF-3 Bill Form / HCFA 1500 Form	10/10/2019	73700	\$ 466.68
1174	0170269950101382	ECLIPSE MEDICAL IMAGING PC	11/25/2019	NF-3 Bill Form / HCFA 1500 Form	10/10/2019	72070	\$ 69.82
1175	0170269950101382	ECLIPSE MEDICAL IMAGING PC	11/25/2019	NF-3 Bill Form / HCFA 1500 Form	10/10/2019	72040	\$ 72.20
1176	0300253850101159	ECLIPSE MEDICAL IMAGING PC	11/26/2019	NF-3 Bill Form / HCFA 1500 Form	10/10/2019	73721	\$ 878.67
1177	0295357360101017	ECLIPSE MEDICAL IMAGING PC	11/29/2019	NF-3 Bill Form / HCFA 1500 Form	10/14/2019	72100	\$ 65.86
1178	0295357360101017	ECLIPSE MEDICAL IMAGING PC	11/29/2019	NF-3 Bill Form / HCFA 1500 Form	10/14/2019	73221	\$ 659.00
1179	0295357360101017	ECLIPSE MEDICAL IMAGING PC	11/29/2019	NF-3 Bill Form / HCFA 1500 Form	10/14/2019	73221	\$ 878.67
1180	0805258860000001	ECLIPSE MEDICAL IMAGING PC	11/29/2019	NF-3 Bill Form / HCFA 1500 Form	10/14/2019	73721	\$ 878.67
1181	0668419120000002	ECLIPSE MEDICAL IMAGING PC	11/29/2019	NF-3 Bill Form / HCFA 1500 Form	10/15/2019	73221	\$ 878.67
1182	0547374060101010	ECLIPSE MEDICAL IMAGING PC	11/29/2019	NF-3 Bill Form / HCFA 1500 Form	10/14/2019	73221	\$ 659.00
1183	0547374060101010	ECLIPSE MEDICAL IMAGING PC	11/29/2019	NF-3 Bill Form / HCFA 1500 Form	10/14/2019	72148	\$ 912.00
1184	0620510630101037	ECLIPSE MEDICAL IMAGING PC	11/29/2019	NF-3 Bill Form / HCFA 1500 Form	10/15/2019	74176	\$ 280.10
1185	0620510630101037	ECLIPSE MEDICAL IMAGING PC	11/29/2019	NF-3 Bill Form / HCFA 1500 Form	10/15/2019	70486	\$ 481.91
1186	0007442270101387	ECLIPSE MEDICAL IMAGING PC	11/29/2019	NF-3 Bill Form / HCFA 1500 Form	10/15/2019	72148	\$ 912.00
1187	0007442270101387	ECLIPSE MEDICAL IMAGING PC	11/29/2019	NF-3 Bill Form / HCFA 1500 Form	10/15/2019	72141	\$ 659.79
1188	0642277650101023	ECLIPSE MEDICAL IMAGING PC	12/2/2019	NF-3 Bill Form / HCFA 1500 Form	10/17/2019	72131	\$ 581.90
1189	0435816710101143	ECLIPSE MEDICAL IMAGING PC	12/2/2019	NF-3 Bill Form / HCFA 1500 Form	10/17/2019	72040	\$ 72.20
1190	0435816710101143	ECLIPSE MEDICAL IMAGING PC	12/2/2019	NF-3 Bill Form / HCFA 1500 Form	10/17/2019	72148	\$ 912.00

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Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
1191	0435816710101143	ECLIPSE MEDICAL IMAGING PC	12/2/2019	NF-3 Bill Form / HCFA 1500 Form	10/17/2019	72100	\$ 65.86
1192	0435816710101143	ECLIPSE MEDICAL IMAGING PC	12/2/2019	NF-3 Bill Form / HCFA 1500 Form	10/17/2019	72141	\$ 659.79
1193	0617273430101039	ECLIPSE MEDICAL IMAGING PC	12/2/2019	NF-3 Bill Form / HCFA 1500 Form	10/14/2019	72146	\$ 959.61
1194	0562587840101049	ECLIPSE MEDICAL IMAGING PC	12/2/2019	NF-3 Bill Form / HCFA 1500 Form	10/14/2019	72148	\$ 912.00
1195	0637160320101011	ECLIPSE MEDICAL IMAGING PC	12/2/2019	NF-3 Bill Form / HCFA 1500 Form	10/16/2019	73221	\$ 878.67
1196	0562587840101049	ECLIPSE MEDICAL IMAGING PC	12/2/2019	NF-3 Bill Form / HCFA 1500 Form	10/17/2019	73221	\$ 878.67
1197	0599367280101016	ECLIPSE MEDICAL IMAGING PC	12/2/2019	NF-3 Bill Form / HCFA 1500 Form	10/15/2019	73221	\$ 659.00
1198	0599367280101016	ECLIPSE MEDICAL IMAGING PC	12/2/2019	NF-3 Bill Form / HCFA 1500 Form	10/15/2019	73721	\$ 878.67
1199	0529845570101015	ECLIPSE MEDICAL IMAGING PC	12/2/2019	NF-3 Bill Form / HCFA 1500 Form	10/17/2019	73030	\$ 71.02
1200	0529845570101015	ECLIPSE MEDICAL IMAGING PC	12/2/2019	NF-3 Bill Form / HCFA 1500 Form	10/17/2019	72040	\$ 96.27
1201	0529845570101015	ECLIPSE MEDICAL IMAGING PC	12/2/2019	NF-3 Bill Form / HCFA 1500 Form	10/17/2019	72100	\$ 65.86
1202	0529845570101015	ECLIPSE MEDICAL IMAGING PC	12/2/2019	NF-3 Bill Form / HCFA 1500 Form	10/17/2019	73560	\$ 55.54
1203	0435816710101143	ECLIPSE MEDICAL IMAGING PC	12/2/2019	NF-3 Bill Form / HCFA 1500 Form	10/14/2019	73721	\$ 878.67
1204	0444115460101017	ECLIPSE MEDICAL IMAGING PC	12/2/2019	NF-3 Bill Form / HCFA 1500 Form	10/15/2019	72148	\$ 912.00
1205	0444115460101017	ECLIPSE MEDICAL IMAGING PC	12/2/2019	NF-3 Bill Form / HCFA 1500 Form	10/15/2019	73721	\$ 659.00
1206	0327815570101087	ECLIPSE MEDICAL IMAGING PC	12/2/2019	NF-3 Bill Form / HCFA 1500 Form	10/18/2019	72148	\$ 912.00
1207	0327815570101087	ECLIPSE MEDICAL IMAGING PC	12/2/2019	NF-3 Bill Form / HCFA 1500 Form	10/18/2019	73721	\$ 659.00
1208	0100271280101145	ECLIPSE MEDICAL IMAGING PC	12/2/2019	NF-3 Bill Form / HCFA 1500 Form	10/17/2019	73221	\$ 878.67
1209	0554516200101026	ECLIPSE MEDICAL IMAGING PC	12/2/2019	NF-3 Bill Form / HCFA 1500 Form	10/20/2019	73221	\$ 878.67
1210	0179718140101158	ECLIPSE MEDICAL IMAGING PC	12/2/2019	NF-3 Bill Form / HCFA 1500 Form	10/18/2019	72146	\$ 959.61
1211	0179718140101158	ECLIPSE MEDICAL IMAGING PC	12/2/2019	NF-3 Bill Form / HCFA 1500 Form	10/18/2019	72148	\$ 912.00
1212	0630752940000001	ECLIPSE MEDICAL IMAGING PC	12/2/2019	NF-3 Bill Form / HCFA 1500 Form	10/18/2019	73221	\$ 878.67
1213	0409863850000001	ECLIPSE MEDICAL IMAGING PC	12/2/2019	NF-3 Bill Form / HCFA 1500 Form	10/18/2019	73221	\$ 878.67
1214	0327815570101087	ECLIPSE MEDICAL IMAGING PC	12/2/2019	NF-3 Bill Form / HCFA 1500 Form	10/20/2019	71100	\$ 66.65
1215	0327815570101087	ECLIPSE MEDICAL IMAGING PC	12/2/2019	NF-3 Bill Form / HCFA 1500 Form	10/20/2019	72146	\$ 959.61
1216	0592563640000001	ECLIPSE MEDICAL IMAGING PC	12/2/2019	NF-3 Bill Form / HCFA 1500 Form	10/20/2019	72141	\$ 659.79
1217	0592563640000001	ECLIPSE MEDICAL IMAGING PC	12/2/2019	NF-3 Bill Form / HCFA 1500 Form	10/20/2019	72148	\$ 912.00
1218	0179718140101158	ECLIPSE MEDICAL IMAGING PC	12/2/2019	NF-3 Bill Form / HCFA 1500 Form	10/20/2019	72148	\$ 912.00
1219	0179718140101158	ECLIPSE MEDICAL IMAGING PC	12/2/2019	NF-3 Bill Form / HCFA 1500 Form	10/20/2019	72141	\$ 659.79
1220	0591577590101038	ECLIPSE MEDICAL IMAGING PC	12/2/2019	NF-3 Bill Form / HCFA 1500 Form	10/20/2019	72148	\$ 912.00
1221	0661388280101015	ECLIPSE MEDICAL IMAGING PC	12/2/2019	NF-3 Bill Form / HCFA 1500 Form	10/17/2019	72070	\$ 69.82
1222	0661388280101015	ECLIPSE MEDICAL IMAGING PC	12/2/2019	NF-3 Bill Form / HCFA 1500 Form	10/17/2019	72100	\$ 65.86
1223	0661388280101015	ECLIPSE MEDICAL IMAGING PC	12/2/2019	NF-3 Bill Form / HCFA 1500 Form	10/17/2019	72040	\$ 72.20
1224	0661388280101015	ECLIPSE MEDICAL IMAGING PC	12/2/2019	NF-3 Bill Form / HCFA 1500 Form	10/17/2019	73721	\$ 878.67
1225	0482439870101044	ECLIPSE MEDICAL IMAGING PC	12/2/2019	NF-3 Bill Form / HCFA 1500 Form	10/17/2019	71110	\$ 80.94
1226	0482439870101044	ECLIPSE MEDICAL IMAGING PC	12/2/2019	NF-3 Bill Form / HCFA 1500 Form	10/17/2019	70450	\$ 455.47
1227	0562587840101049	ECLIPSE MEDICAL IMAGING PC	12/2/2019	NF-3 Bill Form / HCFA 1500 Form	10/17/2019	72148	\$ 912.00
1228	0562587840101049	ECLIPSE MEDICAL IMAGING PC	12/2/2019	NF-3 Bill Form / HCFA 1500 Form	10/16/2019	72148	\$ 912.00
1229	0662027190000001	ECLIPSE MEDICAL IMAGING PC	12/2/2019	NF-3 Bill Form / HCFA 1500 Form	10/16/2019	73721	\$ 878.67
1230	0666296680101011	ECLIPSE MEDICAL IMAGING PC	12/2/2019	NF-3 Bill Form / HCFA 1500 Form	10/17/2019	73700	\$ 486.68
1231	0609157580101023	ECLIPSE MEDICAL IMAGING PC	12/2/2019	NF-3 Bill Form / HCFA 1500 Form	10/16/2019	72146	\$ 959.61
1232	0592563640000001	ECLIPSE MEDICAL IMAGING PC	12/2/2019	NF-3 Bill Form / HCFA 1500 Form	10/14/2019	73721	\$ 878.67
1233	0666764970000001	ECLIPSE MEDICAL IMAGING PC	12/2/2019	NF-3 Bill Form / HCFA 1500 Form	10/17/2019	72148	\$ 912.00
1234	0666764970000001	ECLIPSE MEDICAL IMAGING PC	12/2/2019	NF-3 Bill Form / HCFA 1500 Form	10/17/2019	73221	\$ 659.00
1235	0666764970000001	ECLIPSE MEDICAL IMAGING PC	12/2/2019	NF-3 Bill Form / HCFA 1500 Form	10/15/2019	73030	\$ 71.02
1236	0666764970000001	ECLIPSE MEDICAL IMAGING PC	12/2/2019	NF-3 Bill Form / HCFA 1500 Form	10/15/2019	73030	\$ 71.02
1237	0666764970000001	ECLIPSE MEDICAL IMAGING PC	12/2/2019	NF-3 Bill Form / HCFA 1500 Form	10/15/2019	72100	\$ 65.86
1238	0666764970000001	ECLIPSE MEDICAL IMAGING PC	12/2/2019	NF-3 Bill Form / HCFA 1500 Form	10/15/2019	72040	\$ 72.20
1239	0666764970000001	ECLIPSE MEDICAL IMAGING PC	12/2/2019	NF-3 Bill Form / HCFA 1500 Form	10/15/2019	73221	\$ 878.67
1240	0562587840101049	ECLIPSE MEDICAL IMAGING PC	12/2/2019	NF-3 Bill Form / HCFA 1500 Form	10/14/2019	72141	\$ 879.73
1241	0445020360000001	ECLIPSE MEDICAL IMAGING PC	12/2/2019	NF-3 Bill Form / HCFA 1500 Form	10/15/2019	73510	\$ 62.68
1242	0445020360000001	ECLIPSE MEDICAL IMAGING PC	12/2/2019	NF-3 Bill Form / HCFA 1500 Form	10/15/2019	73030	\$ 71.02
1243	0445020360000001	ECLIPSE MEDICAL IMAGING PC	12/2/2019	NF-3 Bill Form / HCFA 1500 Form	10/15/2019	72200	\$ 60.69
1244	0445020360000001	ECLIPSE MEDICAL IMAGING PC	12/2/2019	NF-3 Bill Form / HCFA 1500 Form	10/15/2019	73721	\$ 878.67
1245	0445020360000001	ECLIPSE MEDICAL IMAGING PC	12/2/2019	NF-3 Bill Form / HCFA 1500 Form	10/15/2019	73120	\$ 47.61
1246	0445020360000001	ECLIPSE MEDICAL IMAGING PC	12/2/2019	NF-3 Bill Form / HCFA 1500 Form	10/15/2019	73560	\$ 55.54
1247	0445020360000001	ECLIPSE MEDICAL IMAGING PC	12/2/2019	NF-3 Bill Form / HCFA 1500 Form	10/15/2019	73221	\$ 659.00
1248	0427436360101143	ECLIPSE MEDICAL IMAGING PC	12/2/2019	NF-3 Bill Form / HCFA 1500 Form	10/17/2019	72100	\$ 65.86
1249	0427436360101143	ECLIPSE MEDICAL IMAGING PC	12/2/2019	NF-3 Bill Form / HCFA 1500 Form	10/17/2019	73721	\$ 878.67
1250	0427436360101143	ECLIPSE MEDICAL IMAGING PC	12/2/2019	NF-3 Bill Form / HCFA 1500 Form	10/17/2019	73721	\$ 659.00
1251	0427436360101143	ECLIPSE MEDICAL IMAGING PC	12/2/2019	NF-3 Bill Form / HCFA 1500 Form	10/17/2019	72070	\$ 69.82
1252	0170269950101382	ECLIPSE MEDICAL IMAGING PC	12/2/2019	NF-3 Bill Form / HCFA 1500 Form	10/17/2019	72131	\$ 581.90
1253	0170269950101382	ECLIPSE MEDICAL IMAGING PC	12/2/2019	NF-3 Bill Form / HCFA 1500 Form	10/17/2019	72125	\$ 436.42
1254	0640865870000001	ECLIPSE MEDICAL IMAGING PC	12/2/2019	NF-3 Bill Form / HCFA 1500 Form	10/16/2019	73721	\$ 878.67
1255	0427436360101143	ECLIPSE MEDICAL IMAGING PC	12/2/2019	NF-3 Bill Form / HCFA 1500 Form	10/17/2019	72148	\$ 912.00
1256	0661388280101015	ECLIPSE MEDICAL IMAGING PC	12/2/2019	NF-3 Bill Form / HCFA 1500 Form	10/20/2019	72141	\$ 659.79
1257	0661388280101015	ECLIPSE MEDICAL IMAGING PC	12/2/2019	NF-3 Bill Form / HCFA 1500 Form	10/20/2019	72148	\$ 912.00
1258	0633292200000001	ECLIPSE MEDICAL IMAGING PC	12/3/2019	NF-3 Bill Form / HCFA 1500 Form	10/14/2019	72148	\$ 912.00
1259	0309181510000001	ECLIPSE MEDICAL IMAGING PC	12/3/2019	NF-3 Bill Form / HCFA 1500 Form	10/20/2019	72141	\$ 659.79
1260	0309181510000001	ECLIPSE MEDICAL IMAGING PC	12/3/2019	NF-3 Bill Form / HCFA 1500 Form	10/20/2019	72148	\$ 912.00

Government Employees Insurance Company, et al v. Eclipse Medical Imaging, et al
Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
1261	0220010800101044	ECLIPSE MEDICAL IMAGING PC	12/6/2019	NF-3 Bill Form / HCFA 1500 Form	10/21/2019	73221	\$ 878.67
1262	0524135450101011	ECLIPSE MEDICAL IMAGING PC	12/6/2019	NF-3 Bill Form / HCFA 1500 Form	10/21/2019	72148	\$ 912.00
1263	0524135450101011	ECLIPSE MEDICAL IMAGING PC	12/6/2019	NF-3 Bill Form / HCFA 1500 Form	10/21/2019	72141	\$ 659.79
1264	0379233190101140	ECLIPSE MEDICAL IMAGING PC	12/6/2019	NF-3 Bill Form / HCFA 1500 Form	10/21/2019	73221	\$ 878.67
1265	0379233190101140	ECLIPSE MEDICAL IMAGING PC	12/6/2019	NF-3 Bill Form / HCFA 1500 Form	10/21/2019	73718	\$ 676.06
1266	0007442270101387	ECLIPSE MEDICAL IMAGING PC	12/6/2019	NF-3 Bill Form / HCFA 1500 Form	10/22/2019	73721	\$ 878.67
1267	0444115460101017	ECLIPSE MEDICAL IMAGING PC	12/6/2019	NF-3 Bill Form / HCFA 1500 Form	10/22/2019	72146	\$ 959.61
1268	0220010800101044	ECLIPSE MEDICAL IMAGING PC	12/6/2019	NF-3 Bill Form / HCFA 1500 Form	10/21/2019	73030	\$ 71.02
1269	0220010800101044	ECLIPSE MEDICAL IMAGING PC	12/6/2019	NF-3 Bill Form / HCFA 1500 Form	10/21/2019	72070	\$ 69.82
1270	0220010800101044	ECLIPSE MEDICAL IMAGING PC	12/6/2019	NF-3 Bill Form / HCFA 1500 Form	10/21/2019	72141	\$ 879.73
1271	0661388280101015	ECLIPSE MEDICAL IMAGING PC	12/6/2019	NF-3 Bill Form / HCFA 1500 Form	10/22/2019	72148	\$ 912.00
1272	0661388280101015	ECLIPSE MEDICAL IMAGING PC	12/6/2019	NF-3 Bill Form / HCFA 1500 Form	10/22/2019	72141	\$ 659.79
1273	0435434680101075	ECLIPSE MEDICAL IMAGING PC	12/6/2019	NF-3 Bill Form / HCFA 1500 Form	10/21/2019	72146	\$ 959.61
1274	0435434680101075	ECLIPSE MEDICAL IMAGING PC	12/6/2019	NF-3 Bill Form / HCFA 1500 Form	10/21/2019	73600	\$ 54.75
1275	0125625810101027	ECLIPSE MEDICAL IMAGING PC	12/6/2019	NF-3 Bill Form / HCFA 1500 Form	10/22/2019	73510	\$ 62.68
1276	0125625810101027	ECLIPSE MEDICAL IMAGING PC	12/6/2019	NF-3 Bill Form / HCFA 1500 Form	10/22/2019	72200	\$ 60.69
1277	0125625810101027	ECLIPSE MEDICAL IMAGING PC	12/6/2019	NF-3 Bill Form / HCFA 1500 Form	10/22/2019	72100	\$ 87.81
1278	0176239210101046	ECLIPSE MEDICAL IMAGING PC	12/6/2019	NF-3 Bill Form / HCFA 1500 Form	10/21/2019	72146	\$ 959.61
1279	0100271280101145	ECLIPSE MEDICAL IMAGING PC	12/9/2019	NF-3 Bill Form / HCFA 1500 Form	10/24/2019	72141	\$ 879.73
1280	0100271280101145	ECLIPSE MEDICAL IMAGING PC	12/9/2019	NF-3 Bill Form / HCFA 1500 Form	10/24/2019	73218	\$ 574.49
1281	0587756200000001	ECLIPSE MEDICAL IMAGING PC	12/9/2019	NF-3 Bill Form / HCFA 1500 Form	10/23/2019	73560	\$ 55.54
1282	0587756200000001	ECLIPSE MEDICAL IMAGING PC	12/9/2019	NF-3 Bill Form / HCFA 1500 Form	10/23/2019	72040	\$ 96.27
1283	0587756200000001	ECLIPSE MEDICAL IMAGING PC	12/9/2019	NF-3 Bill Form / HCFA 1500 Form	10/23/2019	72100	\$ 65.86
1284	0587756200000001	ECLIPSE MEDICAL IMAGING PC	12/9/2019	NF-3 Bill Form / HCFA 1500 Form	10/23/2019	73560	\$ 55.54
1285	0637160320101011	ECLIPSE MEDICAL IMAGING PC	12/9/2019	NF-3 Bill Form / HCFA 1500 Form	10/23/2019	72141	\$ 879.73
1286	0657624780101013	ECLIPSE MEDICAL IMAGING PC	12/9/2019	NF-3 Bill Form / HCFA 1500 Form	10/23/2019	72148	\$ 912.00
1287	0482439870101044	ECLIPSE MEDICAL IMAGING PC	12/9/2019	NF-3 Bill Form / HCFA 1500 Form	10/23/2019	73221	\$ 659.00
1288	0482439870101044	ECLIPSE MEDICAL IMAGING PC	12/9/2019	NF-3 Bill Form / HCFA 1500 Form	10/23/2019	73721	\$ 878.67
1289	0339517590101016	ECLIPSE MEDICAL IMAGING PC	12/9/2019	NF-3 Bill Form / HCFA 1500 Form	10/23/2019	73721	\$ 878.67
1290	0330941020101182	ECLIPSE MEDICAL IMAGING PC	12/9/2019	NF-3 Bill Form / HCFA 1500 Form	10/24/2019	73721	\$ 878.67
1291	0168438110101095	ECLIPSE MEDICAL IMAGING PC	12/9/2019	NF-3 Bill Form / HCFA 1500 Form	10/24/2019	73221	\$ 878.67
1292	0533345150101025	ECLIPSE MEDICAL IMAGING PC	12/9/2019	NF-3 Bill Form / HCFA 1500 Form	2/26/2019	73721	\$ 878.67
1293	0326272780000001	ECLIPSE MEDICAL IMAGING PC	12/9/2019	NF-3 Bill Form / HCFA 1500 Form	10/23/2019	70551	\$ 874.44
1294	0609019050101019	ECLIPSE MEDICAL IMAGING PC	12/9/2019	NF-3 Bill Form / HCFA 1500 Form	10/23/2019	73721	\$ 878.67
1295	0568618380101026	ECLIPSE MEDICAL IMAGING PC	12/9/2019	NF-3 Bill Form / HCFA 1500 Form	10/23/2019	73221	\$ 659.00
1296	0568618380101026	ECLIPSE MEDICAL IMAGING PC	12/9/2019	NF-3 Bill Form / HCFA 1500 Form	10/23/2019	72148	\$ 912.00
1297	0529845570101015	ECLIPSE MEDICAL IMAGING PC	12/10/2019	NF-3 Bill Form / HCFA 1500 Form	10/28/2019	73221	\$ 878.67
1298	0529845570101015	ECLIPSE MEDICAL IMAGING PC	12/10/2019	NF-3 Bill Form / HCFA 1500 Form	10/28/2019	73721	\$ 659.00
1299	0137324320101075	ECLIPSE MEDICAL IMAGING PC	12/10/2019	NF-3 Bill Form / HCFA 1500 Form	10/28/2019	73721	\$ 878.67
1300	0352494380101097	ECLIPSE MEDICAL IMAGING PC	12/10/2019	NF-3 Bill Form / HCFA 1500 Form	10/25/2019	72148	\$ 912.00
1301	0352494380101097	ECLIPSE MEDICAL IMAGING PC	12/10/2019	NF-3 Bill Form / HCFA 1500 Form	10/25/2019	72141	\$ 659.79
1302	0220010800101044	ECLIPSE MEDICAL IMAGING PC	12/10/2019	NF-3 Bill Form / HCFA 1500 Form	10/25/2019	72148	\$ 912.00
1303	0513389370101105	ECLIPSE MEDICAL IMAGING PC	12/10/2019	NF-3 Bill Form / HCFA 1500 Form	10/22/2019	72141	\$ 879.73
1304	0220010800101044	ECLIPSE MEDICAL IMAGING PC	12/10/2019	NF-3 Bill Form / HCFA 1500 Form	10/25/2019	72148	\$ 912.00
1305	0379233190101140	ECLIPSE MEDICAL IMAGING PC	12/10/2019	NF-3 Bill Form / HCFA 1500 Form	10/27/2019	73721	\$ 659.00
1306	0379233190101140	ECLIPSE MEDICAL IMAGING PC	12/10/2019	NF-3 Bill Form / HCFA 1500 Form	10/27/2019	72141	\$ 879.73
1307	0661992260000001	ECLIPSE MEDICAL IMAGING PC	12/10/2019	NF-3 Bill Form / HCFA 1500 Form	9/20/2019	73721	\$ 878.67
1308	0491414830101019	ECLIPSE MEDICAL IMAGING PC	12/10/2019	NF-3 Bill Form / HCFA 1500 Form	10/25/2019	73721	\$ 878.67
1309	0513389370101105	ECLIPSE MEDICAL IMAGING PC	12/10/2019	NF-3 Bill Form / HCFA 1500 Form	10/27/2019	72148	\$ 912.00
1310	0661388280101015	ECLIPSE MEDICAL IMAGING PC	12/10/2019	NF-3 Bill Form / HCFA 1500 Form	10/25/2019	72141	\$ 659.79
1311	0661388280101015	ECLIPSE MEDICAL IMAGING PC	12/10/2019	NF-3 Bill Form / HCFA 1500 Form	10/25/2019	72148	\$ 912.00
1312	0631979220000001	ECLIPSE MEDICAL IMAGING PC	12/13/2019	NF-3 Bill Form / HCFA 1500 Form	10/29/2019	73721	\$ 659.00
1313	0631979220000001	ECLIPSE MEDICAL IMAGING PC	12/13/2019	NF-3 Bill Form / HCFA 1500 Form	10/29/2019	73221	\$ 878.67
1314	0590472450101016	ECLIPSE MEDICAL IMAGING PC	12/13/2019	NF-3 Bill Form / HCFA 1500 Form	10/29/2019	73221	\$ 878.67
1315	0633292200000001	ECLIPSE MEDICAL IMAGING PC	12/16/2019	NF-3 Bill Form / HCFA 1500 Form	10/23/2019	72141	\$ 659.79
1316	0633292200000001	ECLIPSE MEDICAL IMAGING PC	12/16/2019	NF-3 Bill Form / HCFA 1500 Form	10/23/2019	73718	\$ 901.42
1317	0562587840101049	ECLIPSE MEDICAL IMAGING PC	12/16/2019	NF-3 Bill Form / HCFA 1500 Form	10/31/2019	72141	\$ 879.73
1318	0563336670107018	ECLIPSE MEDICAL IMAGING PC	12/16/2019	NF-3 Bill Form / HCFA 1500 Form	10/31/2019	73221	\$ 659.00
1319	0563336670107018	ECLIPSE MEDICAL IMAGING PC	12/16/2019	NF-3 Bill Form / HCFA 1500 Form	10/31/2019	72148	\$ 912.00
1320	0663792910101013	ECLIPSE MEDICAL IMAGING PC	12/16/2019	NF-3 Bill Form / HCFA 1500 Form	10/30/2019	73221	\$ 878.67
1321	0666296680101011	ECLIPSE MEDICAL IMAGING PC	12/16/2019	NF-3 Bill Form / HCFA 1500 Form	10/31/2019	72125	\$ 581.90
1322	0568618380101026	ECLIPSE MEDICAL IMAGING PC	12/16/2019	NF-3 Bill Form / HCFA 1500 Form	10/30/2019	72141	\$ 879.73
1323	0513389370101105	ECLIPSE MEDICAL IMAGING PC	12/16/2019	NF-3 Bill Form / HCFA 1500 Form	11/1/2019	72148	\$ 912.00
1324	0512183820101018	ECLIPSE MEDICAL IMAGING PC	12/16/2019	NF-3 Bill Form / HCFA 1500 Form	11/3/2019	73721	\$ 878.67
1325	0617273430101039	ECLIPSE MEDICAL IMAGING PC	12/16/2019	NF-3 Bill Form / HCFA 1500 Form	11/4/2019	73221	\$ 878.67
1326	0617273430101039	ECLIPSE MEDICAL IMAGING PC	12/16/2019	NF-3 Bill Form / HCFA 1500 Form	11/4/2019	73721	\$ 878.67
1327	0564587270101061	ECLIPSE MEDICAL IMAGING PC	12/16/2019	NF-3 Bill Form / HCFA 1500 Form	11/4/2019	73221	\$ 878.67
1328	0327815570101087	ECLIPSE MEDICAL IMAGING PC	12/16/2019	NF-3 Bill Form / HCFA 1500 Form	11/3/2019	72148	\$ 912.00
1329	0327815570101087	ECLIPSE MEDICAL IMAGING PC	12/16/2019	NF-3 Bill Form / HCFA 1500 Form	11/3/2019	73721	\$ 659.00
1330	0589493880101016	ECLIPSE MEDICAL IMAGING PC	12/16/2019	NF-3 Bill Form / HCFA 1500 Form	11/1/2019	73221	\$ 878.67

Government Employees Insurance Company, et al v. Eclipse Medical Imaging, et al
Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
1331	0319639330101017	ECLIPSE MEDICAL IMAGING PC	12/16/2019	NF-3 Bill Form / HCFA 1500 Form	10/31/2019	73721	\$ 878.67
1332	0512183820101018	ECLIPSE MEDICAL IMAGING PC	12/16/2019	NF-3 Bill Form / HCFA 1500 Form	11/3/2019	73721	\$ 878.67
1333	0100271280101145	ECLIPSE MEDICAL IMAGING PC	12/17/2019	NF-3 Bill Form / HCFA 1500 Form	10/29/2019	73200	\$ 365.01
1334	0100271280101145	ECLIPSE MEDICAL IMAGING PC	12/17/2019	NF-3 Bill Form / HCFA 1500 Form	10/29/2019	72148	\$ 912.00
1335	0569353730101018	ECLIPSE MEDICAL IMAGING PC	12/17/2019	NF-3 Bill Form / HCFA 1500 Form	11/3/2019	73221	\$ 878.67
1336	0599367280101016	ECLIPSE MEDICAL IMAGING PC	12/17/2019	NF-3 Bill Form / HCFA 1500 Form	11/4/2019	72040	\$ 72.20
1337	0599367280101016	ECLIPSE MEDICAL IMAGING PC	12/17/2019	NF-3 Bill Form / HCFA 1500 Form	11/4/2019	72148	\$ 912.00
1338	0599367280101016	ECLIPSE MEDICAL IMAGING PC	12/17/2019	NF-3 Bill Form / HCFA 1500 Form	11/4/2019	72100	\$ 65.86
1339	0599367280101016	ECLIPSE MEDICAL IMAGING PC	12/17/2019	NF-3 Bill Form / HCFA 1500 Form	11/4/2019	72070	\$ 69.82
1340	0599367280101016	ECLIPSE MEDICAL IMAGING PC	12/17/2019	NF-3 Bill Form / HCFA 1500 Form	11/4/2019	72141	\$ 659.79
1341	0125625810101027	ECLIPSE MEDICAL IMAGING PC	12/17/2019	NF-3 Bill Form / HCFA 1500 Form	10/29/2019	73718	\$ 901.42
1342	0007442270101387	ECLIPSE MEDICAL IMAGING PC	12/17/2019	NF-3 Bill Form / HCFA 1500 Form	10/30/2019	73221	\$ 878.67
1343	0007442270101387	ECLIPSE MEDICAL IMAGING PC	12/17/2019	NF-3 Bill Form / HCFA 1500 Form	10/30/2019	73721	\$ 659.00
1344	0513389370101105	ECLIPSE MEDICAL IMAGING PC	12/17/2019	NF-3 Bill Form / HCFA 1500 Form	11/1/2019	72141	\$ 879.73
1345	0409863850000001	ECLIPSE MEDICAL IMAGING PC	12/19/2019	NF-3 Bill Form / HCFA 1500 Form	11/3/2019	72040	\$ 72.20
1346	0409863850000001	ECLIPSE MEDICAL IMAGING PC	12/19/2019	NF-3 Bill Form / HCFA 1500 Form	11/3/2019	72070	\$ 69.82
1347	0409863850000001	ECLIPSE MEDICAL IMAGING PC	12/19/2019	NF-3 Bill Form / HCFA 1500 Form	11/3/2019	72100	\$ 65.86
1348	0409863850000001	ECLIPSE MEDICAL IMAGING PC	12/19/2019	NF-3 Bill Form / HCFA 1500 Form	11/3/2019	72141	\$ 659.79
1349	0409863850000001	ECLIPSE MEDICAL IMAGING PC	12/19/2019	NF-3 Bill Form / HCFA 1500 Form	11/3/2019	72148	\$ 912.00
1350	0482439870101044	ECLIPSE MEDICAL IMAGING PC	12/20/2019	NF-3 Bill Form / HCFA 1500 Form	11/6/2019	72141	\$ 659.79
1351	0482439870101044	ECLIPSE MEDICAL IMAGING PC	12/20/2019	NF-3 Bill Form / HCFA 1500 Form	11/6/2019	72148	\$ 912.00
1352	0482439870101044	ECLIPSE MEDICAL IMAGING PC	12/20/2019	NF-3 Bill Form / HCFA 1500 Form	11/6/2019	72100	\$ 65.86
1353	0458648230101085	ECLIPSE MEDICAL IMAGING PC	12/20/2019	NF-3 Bill Form / HCFA 1500 Form	11/6/2019	73721	\$ 878.67
1354	0616468510101020	ECLIPSE MEDICAL IMAGING PC	12/20/2019	NF-3 Bill Form / HCFA 1500 Form	11/6/2019	72146	\$ 959.61
1355	0563336670107018	ECLIPSE MEDICAL IMAGING PC	12/20/2019	NF-3 Bill Form / HCFA 1500 Form	11/5/2019	72141	\$ 879.73
1356	0356822550101080	ECLIPSE MEDICAL IMAGING PC	12/20/2019	NF-3 Bill Form / HCFA 1500 Form	11/6/2019	72141	\$ 659.79
1357	0356822550101080	ECLIPSE MEDICAL IMAGING PC	12/20/2019	NF-3 Bill Form / HCFA 1500 Form	11/6/2019	72148	\$ 912.00
1358	0619839800000001	ECLIPSE MEDICAL IMAGING PC	12/20/2019	NF-3 Bill Form / HCFA 1500 Form	11/5/2019	72148	\$ 912.00
1359	0458648230101085	ECLIPSE MEDICAL IMAGING PC	12/20/2019	NF-3 Bill Form / HCFA 1500 Form	11/6/2019	73221	\$ 878.67
1360	0541916720101016	ECLIPSE MEDICAL IMAGING PC	12/20/2019	NF-3 Bill Form / HCFA 1500 Form	11/6/2019	73600	\$ 54.75
1361	0541916720101016	ECLIPSE MEDICAL IMAGING PC	12/20/2019	NF-3 Bill Form / HCFA 1500 Form	11/6/2019	73721	\$ 878.67
1362	0611951120101031	ECLIPSE MEDICAL IMAGING PC	12/20/2019	NF-3 Bill Form / HCFA 1500 Form	11/5/2019	72100	\$ 65.86
1363	0611951120101031	ECLIPSE MEDICAL IMAGING PC	12/20/2019	NF-3 Bill Form / HCFA 1500 Form	11/5/2019	73718	\$ 901.42
1364	0611951120101031	ECLIPSE MEDICAL IMAGING PC	12/20/2019	NF-3 Bill Form / HCFA 1500 Form	11/5/2019	72070	\$ 69.82
1365	0319639330101017	ECLIPSE MEDICAL IMAGING PC	12/23/2019	NF-3 Bill Form / HCFA 1500 Form	11/6/2019	73721	\$ 878.67
1366	0631979220000001	ECLIPSE MEDICAL IMAGING PC	12/24/2019	NF-3 Bill Form / HCFA 1500 Form	11/8/2019	72148	\$ 912.00
1367	0631979220000001	ECLIPSE MEDICAL IMAGING PC	12/24/2019	NF-3 Bill Form / HCFA 1500 Form	11/8/2019	72141	\$ 659.79
1368	0631979220000001	ECLIPSE MEDICAL IMAGING PC	12/24/2019	NF-3 Bill Form / HCFA 1500 Form	11/10/2019	72141	\$ 659.79
1369	0631979220000001	ECLIPSE MEDICAL IMAGING PC	12/24/2019	NF-3 Bill Form / HCFA 1500 Form	11/10/2019	72148	\$ 912.00
1370	0644688370101036	ECLIPSE MEDICAL IMAGING PC	12/24/2019	NF-3 Bill Form / HCFA 1500 Form	11/7/2019	72146	\$ 959.61
1371	0662027190000001	ECLIPSE MEDICAL IMAGING PC	12/24/2019	NF-3 Bill Form / HCFA 1500 Form	11/8/2019	72141	\$ 879.73
1372	0587756200000001	ECLIPSE MEDICAL IMAGING PC	12/24/2019	NF-3 Bill Form / HCFA 1500 Form	11/10/2019	72146	\$ 959.61
1373	0587756200000001	ECLIPSE MEDICAL IMAGING PC	12/24/2019	NF-3 Bill Form / HCFA 1500 Form	11/7/2019	72141	\$ 659.79
1374	0587756200000001	ECLIPSE MEDICAL IMAGING PC	12/24/2019	NF-3 Bill Form / HCFA 1500 Form	11/7/2019	72148	\$ 912.00
1375	0662027190000001	ECLIPSE MEDICAL IMAGING PC	12/24/2019	NF-3 Bill Form / HCFA 1500 Form	11/8/2019	73721	\$ 878.67
1376	0312416310101037	ECLIPSE MEDICAL IMAGING PC	12/24/2019	NF-3 Bill Form / HCFA 1500 Form	11/8/2019	72146	\$ 959.61
1377	0389342160000001	ECLIPSE MEDICAL IMAGING PC	12/24/2019	NF-3 Bill Form / HCFA 1500 Form	11/10/2019	72148	\$ 912.00
1378	0621564610101012	ECLIPSE MEDICAL IMAGING PC	12/24/2019	NF-3 Bill Form / HCFA 1500 Form	11/7/2019	73221	\$ 878.67
1379	0458648230101085	ECLIPSE MEDICAL IMAGING PC	12/24/2019	NF-3 Bill Form / HCFA 1500 Form	11/7/2019	73700	\$ 486.68
1380	0386480730101036	ECLIPSE MEDICAL IMAGING PC	12/27/2019	NF-3 Bill Form / HCFA 1500 Form	7/15/2019	73721	\$ 878.67
1381	0386480730101036	ECLIPSE MEDICAL IMAGING PC	12/27/2019	NF-3 Bill Form / HCFA 1500 Form	8/7/2019	72148	\$ 912.00
1382	0386480730101036	ECLIPSE MEDICAL IMAGING PC	12/27/2019	NF-3 Bill Form / HCFA 1500 Form	8/20/2019	73721	\$ 878.67
1383	0386480730101036	ECLIPSE MEDICAL IMAGING PC	12/27/2019	NF-3 Bill Form / HCFA 1500 Form	8/26/2019	73221	\$ 878.67
1384	0386480730101036	ECLIPSE MEDICAL IMAGING PC	12/27/2019	NF-3 Bill Form / HCFA 1500 Form	9/4/2019	73718	\$ 901.42
1385	0511451890101014	ECLIPSE MEDICAL IMAGING PC	12/30/2019	NF-3 Bill Form / HCFA 1500 Form	11/14/2019	73221	\$ 878.67
1386	0304772060101027	ECLIPSE MEDICAL IMAGING PC	12/30/2019	NF-3 Bill Form / HCFA 1500 Form	11/14/2019	72100	\$ 65.86
1387	0304772060101027	ECLIPSE MEDICAL IMAGING PC	12/30/2019	NF-3 Bill Form / HCFA 1500 Form	11/14/2019	72070	\$ 69.82
1388	0304772060101027	ECLIPSE MEDICAL IMAGING PC	12/30/2019	NF-3 Bill Form / HCFA 1500 Form	11/14/2019	73221	\$ 878.67
1389	0662027190000001	ECLIPSE MEDICAL IMAGING PC	12/30/2019	NF-3 Bill Form / HCFA 1500 Form	11/11/2019	72070	\$ 69.82
1390	0662027190000001	ECLIPSE MEDICAL IMAGING PC	12/30/2019	NF-3 Bill Form / HCFA 1500 Form	11/11/2019	73721	\$ 878.67
1391	0662027190000001	ECLIPSE MEDICAL IMAGING PC	12/30/2019	NF-3 Bill Form / HCFA 1500 Form	11/11/2019	72040	\$ 72.20
1392	0361035020101027	ECLIPSE MEDICAL IMAGING PC	12/30/2019	NF-3 Bill Form / HCFA 1500 Form	11/12/2019	73200	\$ 486.68
1393	048236830101044	ECLIPSE MEDICAL IMAGING PC	12/30/2019	NF-3 Bill Form / HCFA 1500 Form	11/15/2019	73221	\$ 878.67
1394	0125625810101027	ECLIPSE MEDICAL IMAGING PC	12/30/2019	NF-3 Bill Form / HCFA 1500 Form	11/12/2019	72148	\$ 912.00
1395	0662027190000001	ECLIPSE MEDICAL IMAGING PC	12/30/2019	NF-3 Bill Form / HCFA 1500 Form	11/11/2019	72040	\$ 72.20
1396	0662027190000001	ECLIPSE MEDICAL IMAGING PC	12/30/2019	NF-3 Bill Form / HCFA 1500 Form	11/11/2019	72100	\$ 65.86
1397	0662027190000001	ECLIPSE MEDICAL IMAGING PC	12/30/2019	NF-3 Bill Form / HCFA 1500 Form	11/11/2019	72148	\$ 912.00
1398	0619839800000001	ECLIPSE MEDICAL IMAGING PC	12/30/2019	NF-3 Bill Form / HCFA 1500 Form	11/12/2019	72146	\$ 959.61
1399	0554516200101026	ECLIPSE MEDICAL IMAGING PC	12/30/2019	NF-3 Bill Form / HCFA 1500 Form	11/17/2019	72110	\$ 65.86
1400	0554516200101026	ECLIPSE MEDICAL IMAGING PC	12/30/2019	NF-3 Bill Form / HCFA 1500 Form	11/17/2019	72040	\$ 72.20

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Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
1401	0554516200101026	ECLIPSE MEDICAL IMAGING PC	12/30/2019	NF-3 Bill Form / HCFA 1500 Form	11/17/2019	72148	\$ 912.00
1402	0554516200101026	ECLIPSE MEDICAL IMAGING PC	12/30/2019	NF-3 Bill Form / HCFA 1500 Form	11/17/2019	72070	\$ 69.82
1403	0554516200101026	ECLIPSE MEDICAL IMAGING PC	12/30/2019	NF-3 Bill Form / HCFA 1500 Form	11/17/2019	72141	\$ 659.79
1404	0569353730101018	ECLIPSE MEDICAL IMAGING PC	12/30/2019	NF-3 Bill Form / HCFA 1500 Form	11/17/2019	72141	\$ 659.79
1405	0569353730101018	ECLIPSE MEDICAL IMAGING PC	12/30/2019	NF-3 Bill Form / HCFA 1500 Form	11/17/2019	72148	\$ 912.00
1406	0599637750101012	ECLIPSE MEDICAL IMAGING PC	12/30/2019	NF-3 Bill Form / HCFA 1500 Form	11/17/2019	72141	\$ 879.73
1407	0291248910101065	ECLIPSE MEDICAL IMAGING PC	12/30/2019	NF-3 Bill Form / HCFA 1500 Form	11/13/2019	72141	\$ 659.79
1408	0291248910101065	ECLIPSE MEDICAL IMAGING PC	12/30/2019	NF-3 Bill Form / HCFA 1500 Form	11/13/2019	72148	\$ 912.00
1409	0527728240101023	ECLIPSE MEDICAL IMAGING PC	12/30/2019	NF-3 Bill Form / HCFA 1500 Form	11/12/2019	73221	\$ 878.67
1410	0527728240101023	ECLIPSE MEDICAL IMAGING PC	12/30/2019	NF-3 Bill Form / HCFA 1500 Form	11/12/2019	73721	\$ 659.00
1411	0664898100000001	ECLIPSE MEDICAL IMAGING PC	12/31/2019	NF-3 Bill Form / HCFA 1500 Form	11/15/2019	73221	\$ 878.67
1412	0358081910101061	ECLIPSE MEDICAL IMAGING PC	1/6/2020	NF-3 Bill Form / HCFA 1500 Form	11/22/2019	72141	\$ 879.73
1413	0304772061010127	ECLIPSE MEDICAL IMAGING PC	1/6/2020	NF-3 Bill Form / HCFA 1500 Form	11/21/2019	72148	\$ 912.00
1414	0537956790101055	ECLIPSE MEDICAL IMAGING PC	1/6/2020	NF-3 Bill Form / HCFA 1500 Form	11/22/2019	73221	\$ 878.67
1415	0168438110101095	ECLIPSE MEDICAL IMAGING PC	1/6/2020	NF-3 Bill Form / HCFA 1500 Form	11/21/2019	72131	\$ 581.90
1416	0168438110101095	ECLIPSE MEDICAL IMAGING PC	1/6/2020	NF-3 Bill Form / HCFA 1500 Form	11/21/2019	72125	\$ 436.42
1417	0645202900000001	ECLIPSE MEDICAL IMAGING PC	1/6/2020	NF-3 Bill Form / HCFA 1500 Form	11/21/2019	72070	\$ 69.82
1418	0645202900000001	ECLIPSE MEDICAL IMAGING PC	1/6/2020	NF-3 Bill Form / HCFA 1500 Form	11/21/2019	72040	\$ 96.27
1419	0645202900000001	ECLIPSE MEDICAL IMAGING PC	1/6/2020	NF-3 Bill Form / HCFA 1500 Form	11/21/2019	72100	\$ 65.86
1420	0389952820101016	ECLIPSE MEDICAL IMAGING PC	1/6/2020	NF-3 Bill Form / HCFA 1500 Form	11/22/2019	73721	\$ 878.67
1421	0424036410101052	ECLIPSE MEDICAL IMAGING PC	1/6/2020	NF-3 Bill Form / HCFA 1500 Form	11/22/2019	73721	\$ 878.67
1422	0424036410101052	ECLIPSE MEDICAL IMAGING PC	1/6/2020	NF-3 Bill Form / HCFA 1500 Form	11/22/2019	73221	\$ 659.00
1423	0656764950000003	ECLIPSE MEDICAL IMAGING PC	1/6/2020	NF-3 Bill Form / HCFA 1500 Form	11/19/2019	72040	\$ 96.27
1424	0656764950000003	ECLIPSE MEDICAL IMAGING PC	1/6/2020	NF-3 Bill Form / HCFA 1500 Form	11/19/2019	73560	\$ 55.54
1425	0656764950000003	ECLIPSE MEDICAL IMAGING PC	1/6/2020	NF-3 Bill Form / HCFA 1500 Form	11/19/2019	72100	\$ 65.86
1426	0656764950000003	ECLIPSE MEDICAL IMAGING PC	1/6/2020	NF-3 Bill Form / HCFA 1500 Form	11/19/2019	72070	\$ 69.82
1427	0603580360101011	ECLIPSE MEDICAL IMAGING PC	1/6/2020	NF-3 Bill Form / HCFA 1500 Form	11/20/2019	73721	\$ 878.67
1428	0667189460000001	ECLIPSE MEDICAL IMAGING PC	1/6/2020	NF-3 Bill Form / HCFA 1500 Form	11/22/2019	72148	\$ 912.00
1429	0662027190000001	ECLIPSE MEDICAL IMAGING PC	1/6/2020	NF-3 Bill Form / HCFA 1500 Form	11/21/2019	72141	\$ 659.79
1430	0662027190000001	ECLIPSE MEDICAL IMAGING PC	1/6/2020	NF-3 Bill Form / HCFA 1500 Form	11/21/2019	72148	\$ 912.00
1431	0247396890101104	ECLIPSE MEDICAL IMAGING PC	1/6/2020	NF-3 Bill Form / HCFA 1500 Form	11/19/2019	73221	\$ 878.67
1432	0803295040000001	ECLIPSE MEDICAL IMAGING PC	1/6/2020	NF-3 Bill Form / HCFA 1500 Form	11/18/2019	73221	\$ 878.67
1433	0247396890101104	ECLIPSE MEDICAL IMAGING PC	1/6/2020	NF-3 Bill Form / HCFA 1500 Form	11/19/2019	73218	\$ 765.99
1434	0552952640101049	ECLIPSE MEDICAL IMAGING PC	1/6/2020	NF-3 Bill Form / HCFA 1500 Form	11/18/2019	72141	\$ 659.79
1435	0552952640101049	ECLIPSE MEDICAL IMAGING PC	1/6/2020	NF-3 Bill Form / HCFA 1500 Form	11/18/2019	73718	\$ 901.42
1436	0547374060101010	ECLIPSE MEDICAL IMAGING PC	1/6/2020	NF-3 Bill Form / HCFA 1500 Form	11/18/2019	71020	\$ 78.29
1437	0448236830101044	ECLIPSE MEDICAL IMAGING PC	1/6/2020	NF-3 Bill Form / HCFA 1500 Form	11/19/2019	72148	\$ 912.00
1438	0533108370000001	ECLIPSE MEDICAL IMAGING PC	1/6/2020	NF-3 Bill Form / HCFA 1500 Form	11/21/2019	71250	\$ 388.81
1439	0533108370000001	ECLIPSE MEDICAL IMAGING PC	1/6/2020	NF-3 Bill Form / HCFA 1500 Form	11/21/2019	73721	\$ 878.67
1440	0509164550101027	ECLIPSE MEDICAL IMAGING PC	1/6/2020	NF-3 Bill Form / HCFA 1500 Form	11/21/2019	71110	\$ 107.92
1441	0509164550101027	ECLIPSE MEDICAL IMAGING PC	1/6/2020	NF-3 Bill Form / HCFA 1500 Form	11/21/2019	72040	\$ 72.20
1442	0509164550101027	ECLIPSE MEDICAL IMAGING PC	1/6/2020	NF-3 Bill Form / HCFA 1500 Form	11/21/2019	73560	\$ 55.54
1443	0532745600101015	ECLIPSE MEDICAL IMAGING PC	1/6/2020	NF-3 Bill Form / HCFA 1500 Form	11/19/2019	73721	\$ 659.00
1444	0532745600101015	ECLIPSE MEDICAL IMAGING PC	1/6/2020	NF-3 Bill Form / HCFA 1500 Form	11/19/2019	72141	\$ 879.73
1445	0353510240101024	ECLIPSE MEDICAL IMAGING PC	1/6/2020	NF-3 Bill Form / HCFA 1500 Form	11/20/2019	73721	\$ 878.67
1446	0645202900000001	ECLIPSE MEDICAL IMAGING PC	1/6/2020	NF-3 Bill Form / HCFA 1500 Form	11/20/2019	73721	\$ 878.67
1447	0527728240101023	ECLIPSE MEDICAL IMAGING PC	1/6/2020	NF-3 Bill Form / HCFA 1500 Form	11/20/2019	72141	\$ 659.79
1448	0527728240101023	ECLIPSE MEDICAL IMAGING PC	1/6/2020	NF-3 Bill Form / HCFA 1500 Form	11/20/2019	72148	\$ 912.00
1449	0658650950000001	ECLIPSE MEDICAL IMAGING PC	1/6/2020	NF-3 Bill Form / HCFA 1500 Form	11/20/2019	72141	\$ 879.73
1450	0658650950000001	ECLIPSE MEDICAL IMAGING PC	1/6/2020	NF-3 Bill Form / HCFA 1500 Form	11/20/2019	72100	\$ 65.86
1451	0658650950000001	ECLIPSE MEDICAL IMAGING PC	1/6/2020	NF-3 Bill Form / HCFA 1500 Form	11/20/2019	72070	\$ 69.82
1452	0658650950000001	ECLIPSE MEDICAL IMAGING PC	1/6/2020	NF-3 Bill Form / HCFA 1500 Form	11/20/2019	72040	\$ 72.20
1453	0295357360101017	ECLIPSE MEDICAL IMAGING PC	1/6/2020	NF-3 Bill Form / HCFA 1500 Form	11/18/2019	72141	\$ 659.79
1454	0295357360101017	ECLIPSE MEDICAL IMAGING PC	1/6/2020	NF-3 Bill Form / HCFA 1500 Form	11/18/2019	72148	\$ 912.00
1455	0630752940000001	ECLIPSE MEDICAL IMAGING PC	1/9/2020	NF-3 Bill Form / HCFA 1500 Form	11/25/2019	72148	\$ 912.00
1456	0630752940000001	ECLIPSE MEDICAL IMAGING PC	1/9/2020	NF-3 Bill Form / HCFA 1500 Form	11/25/2019	72141	\$ 659.79
1457	0648654660000001	ECLIPSE MEDICAL IMAGING PC	1/9/2020	NF-3 Bill Form / HCFA 1500 Form	11/24/2019	73721	\$ 659.00
1458	0648654660000001	ECLIPSE MEDICAL IMAGING PC	1/9/2020	NF-3 Bill Form / HCFA 1500 Form	11/24/2019	73221	\$ 878.67
1459	0575896090101012	ECLIPSE MEDICAL IMAGING PC	1/9/2020	NF-3 Bill Form / HCFA 1500 Form	11/24/2019	72040	\$ 96.27
1460	0575896090101012	ECLIPSE MEDICAL IMAGING PC	1/9/2020	NF-3 Bill Form / HCFA 1500 Form	11/24/2019	72070	\$ 69.82
1461	0575896090101012	ECLIPSE MEDICAL IMAGING PC	1/9/2020	NF-3 Bill Form / HCFA 1500 Form	11/24/2019	72100	\$ 65.86
1462	0554516200101026	ECLIPSE MEDICAL IMAGING PC	1/9/2020	NF-3 Bill Form / HCFA 1500 Form	11/24/2019	72146	\$ 959.61
1463	0667189460000001	ECLIPSE MEDICAL IMAGING PC	1/9/2020	NF-3 Bill Form / HCFA 1500 Form	11/20/2019	72146	\$ 959.61
1464	0627078650000001	ECLIPSE MEDICAL IMAGING PC	1/9/2020	NF-3 Bill Form / HCFA 1500 Form	11/21/2019	72148	\$ 912.00
1465	0627078650000001	ECLIPSE MEDICAL IMAGING PC	1/9/2020	NF-3 Bill Form / HCFA 1500 Form	11/21/2019	72040	\$ 72.20
1466	0627078650000001	ECLIPSE MEDICAL IMAGING PC	1/9/2020	NF-3 Bill Form / HCFA 1500 Form	11/21/2019	72100	\$ 65.86
1467	0627078650000001	ECLIPSE MEDICAL IMAGING PC	1/9/2020	NF-3 Bill Form / HCFA 1500 Form	11/21/2019	72070	\$ 69.82
1468	0627078650000001	ECLIPSE MEDICAL IMAGING PC	1/9/2020	NF-3 Bill Form / HCFA 1500 Form	11/21/2019	73221	\$ 659.00
1469	0575896090101012	ECLIPSE MEDICAL IMAGING PC	1/9/2020	NF-3 Bill Form / HCFA 1500 Form	11/24/2019	72100	\$ 65.86
1470	0575896090101012	ECLIPSE MEDICAL IMAGING PC	1/9/2020	NF-3 Bill Form / HCFA 1500 Form	11/24/2019	72040	\$ 72.20

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Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
1471	0575896090101012	ECLIPSE MEDICAL IMAGING PC	1/9/2020	NF-3 Bill Form / HCFA 1500 Form	11/24/2019	73610	\$ 58.72
1472	0575896090101012	ECLIPSE MEDICAL IMAGING PC	1/9/2020	NF-3 Bill Form / HCFA 1500 Form	11/24/2019	73721	\$ 878.67
1473	0589493880101016	ECLIPSE MEDICAL IMAGING PC	1/9/2020	NF-3 Bill Form / HCFA 1500 Form	11/25/2019	72141	\$ 659.79
1474	0589493880101016	ECLIPSE MEDICAL IMAGING PC	1/9/2020	NF-3 Bill Form / HCFA 1500 Form	11/25/2019	72148	\$ 912.00
1475	0656764950000003	ECLIPSE MEDICAL IMAGING PC	1/13/2020	NF-3 Bill Form / HCFA 1500 Form	11/27/2019	72141	\$ 659.79
1476	0656764950000003	ECLIPSE MEDICAL IMAGING PC	1/13/2020	NF-3 Bill Form / HCFA 1500 Form	11/27/2019	72148	\$ 912.00
1477	0671439440000001	ECLIPSE MEDICAL IMAGING PC	1/13/2020	NF-3 Bill Form / HCFA 1500 Form	11/26/2019	72131	\$ 581.90
1478	0671439440000001	ECLIPSE MEDICAL IMAGING PC	1/13/2020	NF-3 Bill Form / HCFA 1500 Form	11/26/2019	72125	\$ 436.42
1479	0803295040000001	ECLIPSE MEDICAL IMAGING PC	1/13/2020	NF-3 Bill Form / HCFA 1500 Form	11/27/2019	73718	\$ 901.42
1480	0297173410101099	ECLIPSE MEDICAL IMAGING PC	1/13/2020	NF-3 Bill Form / HCFA 1500 Form	11/27/2019	73221	\$ 878.67
1481	0297173410101099	ECLIPSE MEDICAL IMAGING PC	1/13/2020	NF-3 Bill Form / HCFA 1500 Form	11/27/2019	73721	\$ 659.00
1482	0209492050101038	ECLIPSE MEDICAL IMAGING PC	1/13/2020	NF-3 Bill Form / HCFA 1500 Form	12/1/2019	73221	\$ 878.67
1483	0644688370101036	ECLIPSE MEDICAL IMAGING PC	1/13/2020	NF-3 Bill Form / HCFA 1500 Form	11/24/2019	72148	\$ 912.00
1484	0294821070101071	ECLIPSE MEDICAL IMAGING PC	1/13/2020	NF-3 Bill Form / HCFA 1500 Form	11/26/2019	73721	\$ 878.67
1485	0236016030101028	ECLIPSE MEDICAL IMAGING PC	1/13/2020	NF-3 Bill Form / HCFA 1500 Form	11/29/2019	72141	\$ 659.79
1486	0236016030101028	ECLIPSE MEDICAL IMAGING PC	1/13/2020	NF-3 Bill Form / HCFA 1500 Form	11/29/2019	72148	\$ 912.00
1487	0326272780000001	ECLIPSE MEDICAL IMAGING PC	1/13/2020	NF-3 Bill Form / HCFA 1500 Form	11/29/2019	72141	\$ 879.73
1488	0513389370101105	ECLIPSE MEDICAL IMAGING PC	1/13/2020	NF-3 Bill Form / HCFA 1500 Form	12/1/2019	72146	\$ 959.61
1489	0648654660000001	ECLIPSE MEDICAL IMAGING PC	1/13/2020	NF-3 Bill Form / HCFA 1500 Form	12/1/2019	72148	\$ 912.00
1490	0513389370101105	ECLIPSE MEDICAL IMAGING PC	1/13/2020	NF-3 Bill Form / HCFA 1500 Form	12/1/2019	72146	\$ 959.61
1491	0424036410101052	ECLIPSE MEDICAL IMAGING PC	1/15/2020	NF-3 Bill Form / HCFA 1500 Form	11/26/2019	72040	\$ 72.20
1492	0424036410101052	ECLIPSE MEDICAL IMAGING PC	1/15/2020	NF-3 Bill Form / HCFA 1500 Form	11/26/2019	72100	\$ 65.86
1493	0424036410101052	ECLIPSE MEDICAL IMAGING PC	1/15/2020	NF-3 Bill Form / HCFA 1500 Form	11/26/2019	73721	\$ 878.67
1494	0424036410101052	ECLIPSE MEDICAL IMAGING PC	1/15/2020	NF-3 Bill Form / HCFA 1500 Form	11/26/2019	72070	\$ 69.82
1495	0424036410101052	ECLIPSE MEDICAL IMAGING PC	1/15/2020	NF-3 Bill Form / HCFA 1500 Form	11/26/2019	73221	\$ 659.00
1496	0603580360101011	ECLIPSE MEDICAL IMAGING PC	1/16/2020	NF-3 Bill Form / HCFA 1500 Form	12/2/2019	72141	\$ 879.73
1497	0663411870101019	ECLIPSE MEDICAL IMAGING PC	1/16/2020	NF-3 Bill Form / HCFA 1500 Form	12/3/2019	73721	\$ 659.00
1498	0663411870101019	ECLIPSE MEDICAL IMAGING PC	1/16/2020	NF-3 Bill Form / HCFA 1500 Form	12/3/2019	72141	\$ 879.73
1499	0517532770101037	ECLIPSE MEDICAL IMAGING PC	1/16/2020	NF-3 Bill Form / HCFA 1500 Form	12/3/2019	72141	\$ 659.79
1500	0517532770101037	ECLIPSE MEDICAL IMAGING PC	1/16/2020	NF-3 Bill Form / HCFA 1500 Form	12/3/2019	72148	\$ 912.00
1501	0424036410101052	ECLIPSE MEDICAL IMAGING PC	1/16/2020	NF-3 Bill Form / HCFA 1500 Form	12/2/2019	73718	\$ 901.42
1502	0424036410101052	ECLIPSE MEDICAL IMAGING PC	1/16/2020	NF-3 Bill Form / HCFA 1500 Form	12/2/2019	72141	\$ 659.79
1503	038648730101036	ECLIPSE MEDICAL IMAGING PC	1/9/2020	NF-3 Bill Form / HCFA 1500 Form	11/25/2019	72141	\$ 879.73
1504	0297173410101099	ECLIPSE MEDICAL IMAGING PC	1/16/2020	NF-3 Bill Form / HCFA 1500 Form	12/4/2019	72141	\$ 879.73
1505	0297173410101099	ECLIPSE MEDICAL IMAGING PC	1/16/2020	NF-3 Bill Form / HCFA 1500 Form	12/4/2019	73221	\$ 659.00
1506	0603580360101011	ECLIPSE MEDICAL IMAGING PC	1/16/2020	NF-3 Bill Form / HCFA 1500 Form	12/4/2019	72146	\$ 959.61
1507	0327383470101033	ECLIPSE MEDICAL IMAGING PC	1/16/2020	NF-3 Bill Form / HCFA 1500 Form	12/3/2019	72148	\$ 912.00
1508	0630752940000001	ECLIPSE MEDICAL IMAGING PC	1/16/2020	NF-3 Bill Form / HCFA 1500 Form	12/3/2019	72148	\$ 912.00
1509	0326272780000001	ECLIPSE MEDICAL IMAGING PC	1/20/2020	NF-3 Bill Form / HCFA 1500 Form	11/27/2019	72070	\$ 69.82
1510	0326272780000001	ECLIPSE MEDICAL IMAGING PC	1/20/2020	NF-3 Bill Form / HCFA 1500 Form	11/27/2019	72040	\$ 72.20
1511	0326272780000001	ECLIPSE MEDICAL IMAGING PC	1/20/2020	NF-3 Bill Form / HCFA 1500 Form	11/27/2019	72146	\$ 959.61
1512	0326272780000001	ECLIPSE MEDICAL IMAGING PC	1/20/2020	NF-3 Bill Form / HCFA 1500 Form	11/27/2019	73221	\$ 659.00
1513	0552952640101049	ECLIPSE MEDICAL IMAGING PC	1/21/2020	NF-3 Bill Form / HCFA 1500 Form	12/6/2019	72148	\$ 912.00
1514	0458648230101085	ECLIPSE MEDICAL IMAGING PC	1/21/2020	NF-3 Bill Form / HCFA 1500 Form	12/5/2019	72131	\$ 581.90
1515	0543473080101029	ECLIPSE MEDICAL IMAGING PC	1/21/2020	NF-3 Bill Form / HCFA 1500 Form	12/9/2019	73221	\$ 878.67
1516	0644048780000001	ECLIPSE MEDICAL IMAGING PC	1/21/2020	NF-3 Bill Form / HCFA 1500 Form	12/9/2019	72148	\$ 912.00
1517	0644048780000001	ECLIPSE MEDICAL IMAGING PC	1/21/2020	NF-3 Bill Form / HCFA 1500 Form	12/9/2019	72040	\$ 72.20
1518	0644048780000001	ECLIPSE MEDICAL IMAGING PC	1/21/2020	NF-3 Bill Form / HCFA 1500 Form	12/9/2019	72070	\$ 69.82
1519	0644048780000001	ECLIPSE MEDICAL IMAGING PC	1/21/2020	NF-3 Bill Form / HCFA 1500 Form	12/9/2019	72141	\$ 659.79
1520	0644048780000001	ECLIPSE MEDICAL IMAGING PC	1/21/2020	NF-3 Bill Form / HCFA 1500 Form	12/9/2019	72100	\$ 65.86
1521	0663411870101019	ECLIPSE MEDICAL IMAGING PC	1/21/2020	NF-3 Bill Form / HCFA 1500 Form	12/8/2019	72148	\$ 912.00
1522	0353510240101024	ECLIPSE MEDICAL IMAGING PC	1/21/2020	NF-3 Bill Form / HCFA 1500 Form	12/9/2019	72141	\$ 659.79
1523	0353510240101024	ECLIPSE MEDICAL IMAGING PC	1/21/2020	NF-3 Bill Form / HCFA 1500 Form	12/9/2019	72148	\$ 912.00
1524	0599943520101022	ECLIPSE MEDICAL IMAGING PC	1/21/2020	NF-3 Bill Form / HCFA 1500 Form	12/5/2019	73221	\$ 878.67
1525	0662027190000001	ECLIPSE MEDICAL IMAGING PC	1/21/2020	NF-3 Bill Form / HCFA 1500 Form	12/6/2019	73721	\$ 878.67
1526	0437100700101091	ECLIPSE MEDICAL IMAGING PC	1/21/2020	NF-3 Bill Form / HCFA 1500 Form	12/6/2019	72141	\$ 879.73
1527	0537956790101055	ECLIPSE MEDICAL IMAGING PC	1/21/2020	NF-3 Bill Form / HCFA 1500 Form	12/5/2019	72070	\$ 69.82
1528	0537956790101055	ECLIPSE MEDICAL IMAGING PC	1/21/2020	NF-3 Bill Form / HCFA 1500 Form	12/5/2019	72100	\$ 65.86
1529	0537956790101055	ECLIPSE MEDICAL IMAGING PC	1/21/2020	NF-3 Bill Form / HCFA 1500 Form	12/5/2019	72148	\$ 912.00
1530	0537956790101055	ECLIPSE MEDICAL IMAGING PC	1/21/2020	NF-3 Bill Form / HCFA 1500 Form	12/5/2019	72141	\$ 659.79
1531	0537956790101055	ECLIPSE MEDICAL IMAGING PC	1/21/2020	NF-3 Bill Form / HCFA 1500 Form	12/5/2019	72040	\$ 72.20
1532	0543473080101029	ECLIPSE MEDICAL IMAGING PC	1/21/2020	NF-3 Bill Form / HCFA 1500 Form	12/6/2019	73221	\$ 878.67
1533	0458648230101085	ECLIPSE MEDICAL IMAGING PC	1/21/2020	NF-3 Bill Form / HCFA 1500 Form	12/5/2019	72148	\$ 912.00
1534	0309181510000001	ECLIPSE MEDICAL IMAGING PC	1/21/2020	NF-3 Bill Form / HCFA 1500 Form	12/8/2019	73718	\$ 901.42
1535	0297173410101099	ECLIPSE MEDICAL IMAGING PC	1/21/2020	NF-3 Bill Form / HCFA 1500 Form	12/6/2019	72148	\$ 912.00
1536	0424036410101052	ECLIPSE MEDICAL IMAGING PC	1/21/2020	NF-3 Bill Form / HCFA 1500 Form	12/8/2019	72146	\$ 959.61
1537	0424036410101052	ECLIPSE MEDICAL IMAGING PC	1/21/2020	NF-3 Bill Form / HCFA 1500 Form	12/8/2019	73718	\$ 676.06
1538	0649774760101030	ECLIPSE MEDICAL IMAGING PC	1/21/2020	NF-3 Bill Form / HCFA 1500 Form	12/8/2019	73221	\$ 878.67
1539	0644048780000001	ECLIPSE MEDICAL IMAGING PC	1/22/2020	NF-3 Bill Form / HCFA 1500 Form	12/6/2019	72148	\$ 912.00
1540	0644048780000001	ECLIPSE MEDICAL IMAGING PC	1/22/2020	NF-3 Bill Form / HCFA 1500 Form	12/6/2019	73221	\$ 659.00

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Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
1541	0603580360101011	ECLIPSE MEDICAL IMAGING PC	1/24/2020	NF-3 Bill Form / HCFA 1500 Form	12/10/2019	72148	\$ 912.00
1542	0611951120101031	ECLIPSE MEDICAL IMAGING PC	1/24/2020	NF-3 Bill Form / HCFA 1500 Form	12/11/2019	72148	\$ 912.00
1543	0425958070101107	ECLIPSE MEDICAL IMAGING PC	1/24/2020	NF-3 Bill Form / HCFA 1500 Form	12/12/2019	72141	\$ 659.79
1544	0425958070101107	ECLIPSE MEDICAL IMAGING PC	1/24/2020	NF-3 Bill Form / HCFA 1500 Form	12/12/2019	72148	\$ 912.00
1545	0803295040000001	ECLIPSE MEDICAL IMAGING PC	1/24/2020	NF-3 Bill Form / HCFA 1500 Form	12/11/2019	72148	\$ 912.00
1546	0803295040000001	ECLIPSE MEDICAL IMAGING PC	1/24/2020	NF-3 Bill Form / HCFA 1500 Form	12/11/2019	72141	\$ 659.79
1547	0644048780000001	ECLIPSE MEDICAL IMAGING PC	1/24/2020	NF-3 Bill Form / HCFA 1500 Form	12/12/2019	72070	\$ 69.82
1548	0644048780000001	ECLIPSE MEDICAL IMAGING PC	1/24/2020	NF-3 Bill Form / HCFA 1500 Form	12/12/2019	72100	\$ 65.86
1549	0644048780000001	ECLIPSE MEDICAL IMAGING PC	1/24/2020	NF-3 Bill Form / HCFA 1500 Form	12/12/2019	72040	\$ 96.27
1550	0178664350101020	ECLIPSE MEDICAL IMAGING PC	1/24/2020	NF-3 Bill Form / HCFA 1500 Form	12/12/2019	73721	\$ 878.67
1551	0644048780000001	ECLIPSE MEDICAL IMAGING PC	1/24/2020	NF-3 Bill Form / HCFA 1500 Form	12/11/2019	72141	\$ 879.73
1552	0460544170101076	ECLIPSE MEDICAL IMAGING PC	1/24/2020	NF-3 Bill Form / HCFA 1500 Form	12/11/2019	73721	\$ 659.00
1553	0460544170101076	ECLIPSE MEDICAL IMAGING PC	1/24/2020	NF-3 Bill Form / HCFA 1500 Form	12/11/2019	73221	\$ 878.67
1554	0543473080101029	ECLIPSE MEDICAL IMAGING PC	1/27/2020	NF-3 Bill Form / HCFA 1500 Form	12/11/2019	72141	\$ 879.73
1555	0424036410101052	ECLIPSE MEDICAL IMAGING PC	1/27/2020	NF-3 Bill Form / HCFA 1500 Form	12/10/2019	72148	\$ 912.00
1556	0641734470000001	ECLIPSE MEDICAL IMAGING PC	1/27/2020	NF-3 Bill Form / HCFA 1500 Form	12/15/2019	73721	\$ 878.67
1557	0641734470000001	ECLIPSE MEDICAL IMAGING PC	1/27/2020	NF-3 Bill Form / HCFA 1500 Form	12/15/2019	72192	\$ 965.01
1558	0616922920000001	ECLIPSE MEDICAL IMAGING PC	1/28/2020	NF-3 Bill Form / HCFA 1500 Form	12/13/2019	73721	\$ 878.67
1559	0648209790000001	ECLIPSE MEDICAL IMAGING PC	1/21/2020	NF-3 Bill Form / HCFA 1500 Form	12/16/2019	73721	\$ 878.67
1560	0611951120101031	ECLIPSE MEDICAL IMAGING PC	1/29/2020	NF-3 Bill Form / HCFA 1500 Form	12/16/2019	73718	\$ 901.42
1561	0803295040000001	ECLIPSE MEDICAL IMAGING PC	1/31/2020	NF-3 Bill Form / HCFA 1500 Form	12/16/2019	72146	\$ 959.61
1562	0514847020101048	ECLIPSE MEDICAL IMAGING PC	2/3/2020	NF-3 Bill Form / HCFA 1500 Form	12/17/2019	72141	\$ 659.79
1563	0514847020101048	ECLIPSE MEDICAL IMAGING PC	2/3/2020	NF-3 Bill Form / HCFA 1500 Form	12/17/2019	72148	\$ 912.00
1564	0514847020101048	ECLIPSE MEDICAL IMAGING PC	2/3/2020	NF-3 Bill Form / HCFA 1500 Form	12/17/2019	72070	\$ 69.82
1565	0514847020101048	ECLIPSE MEDICAL IMAGING PC	2/3/2020	NF-3 Bill Form / HCFA 1500 Form	12/17/2019	72040	\$ 72.20
1566	0514847020101048	ECLIPSE MEDICAL IMAGING PC	2/3/2020	NF-3 Bill Form / HCFA 1500 Form	12/17/2019	72100	\$ 65.86
1567	0307716600101084	ECLIPSE MEDICAL IMAGING PC	2/3/2020	NF-3 Bill Form / HCFA 1500 Form	12/17/2019	73721	\$ 878.67
1568	0425958070101107	ECLIPSE MEDICAL IMAGING PC	2/3/2020	NF-3 Bill Form / HCFA 1500 Form	12/18/2019	72146	\$ 959.61
1569	0665146310000002	ECLIPSE MEDICAL IMAGING PC	2/3/2020	NF-3 Bill Form / HCFA 1500 Form	12/19/2019	73721	\$ 878.67
1570	0665146310000002	ECLIPSE MEDICAL IMAGING PC	2/3/2020	NF-3 Bill Form / HCFA 1500 Form	12/19/2019	72040	\$ 72.20
1571	0665146310000002	ECLIPSE MEDICAL IMAGING PC	2/3/2020	NF-3 Bill Form / HCFA 1500 Form	12/19/2019	72100	\$ 65.86
1572	0665146310000002	ECLIPSE MEDICAL IMAGING PC	2/3/2020	NF-3 Bill Form / HCFA 1500 Form	12/19/2019	73560	\$ 55.54
1573	0643072400000001	ECLIPSE MEDICAL IMAGING PC	2/3/2020	NF-3 Bill Form / HCFA 1500 Form	12/19/2019	73221	\$ 878.67
1574	0409863850000001	ECLIPSE MEDICAL IMAGING PC	2/3/2020	NF-3 Bill Form / HCFA 1500 Form	12/17/2019	72146	\$ 959.61
1575	0294821070101071	ECLIPSE MEDICAL IMAGING PC	2/3/2020	NF-3 Bill Form / HCFA 1500 Form	12/17/2019	72141	\$ 659.79
1576	0294821070101071	ECLIPSE MEDICAL IMAGING PC	2/3/2020	NF-3 Bill Form / HCFA 1500 Form	12/17/2019	72148	\$ 912.00
1577	0329752880101069	ECLIPSE MEDICAL IMAGING PC	2/3/2020	NF-3 Bill Form / HCFA 1500 Form	12/17/2019	72141	\$ 879.73
1578	0180021040101106	ECLIPSE MEDICAL IMAGING PC	2/3/2020	NF-3 Bill Form / HCFA 1500 Form	12/20/2019	73221	\$ 878.67
1579	0643433080000001	ECLIPSE MEDICAL IMAGING PC	2/3/2020	NF-3 Bill Form / HCFA 1500 Form	12/18/2019	73070	\$ 52.77
1580	0643433080000001	ECLIPSE MEDICAL IMAGING PC	2/3/2020	NF-3 Bill Form / HCFA 1500 Form	12/18/2019	73221	\$ 659.00
1581	0643433080000001	ECLIPSE MEDICAL IMAGING PC	2/3/2020	NF-3 Bill Form / HCFA 1500 Form	12/18/2019	72148	\$ 912.00
1582	0532745600101015	ECLIPSE MEDICAL IMAGING PC	2/3/2020	NF-3 Bill Form / HCFA 1500 Form	12/17/2019	72141	\$ 879.73
1583	0427436360101143	ECLIPSE MEDICAL IMAGING PC	2/3/2020	NF-3 Bill Form / HCFA 1500 Form	12/5/2019	72141	\$ 879.73
1584	0599943520101022	ECLIPSE MEDICAL IMAGING PC	2/3/2020	NF-3 Bill Form / HCFA 1500 Form	12/22/2019	72148	\$ 912.00
1585	0643433080000001	ECLIPSE MEDICAL IMAGING PC	2/3/2020	NF-3 Bill Form / HCFA 1500 Form	12/20/2019	72141	\$ 879.73
1586	0641734470000001	ECLIPSE MEDICAL IMAGING PC	2/3/2020	NF-3 Bill Form / HCFA 1500 Form	12/20/2019	73221	\$ 878.67
1587	0662501110101017	ECLIPSE MEDICAL IMAGING PC	2/3/2020	NF-3 Bill Form / HCFA 1500 Form	12/20/2019	72148	\$ 912.00
1588	0179718140101158	ECLIPSE MEDICAL IMAGING PC	2/3/2020	NF-3 Bill Form / HCFA 1500 Form	12/22/2019	73721	\$ 878.67
1589	0662379970101025	ECLIPSE MEDICAL IMAGING PC	2/3/2020	NF-3 Bill Form / HCFA 1500 Form	12/22/2019	72148	\$ 912.00
1590	0662379970101025	ECLIPSE MEDICAL IMAGING PC	2/3/2020	NF-3 Bill Form / HCFA 1500 Form	12/22/2019	73221	\$ 659.00
1591	0653905540000001	ECLIPSE MEDICAL IMAGING PC	2/3/2020	NF-3 Bill Form / HCFA 1500 Form	12/22/2019	72100	\$ 65.86
1592	0653905540000001	ECLIPSE MEDICAL IMAGING PC	2/3/2020	NF-3 Bill Form / HCFA 1500 Form	12/22/2019	72070	\$ 69.82
1593	0653905540000001	ECLIPSE MEDICAL IMAGING PC	2/3/2020	NF-3 Bill Form / HCFA 1500 Form	12/22/2019	73200	\$ 486.68
1594	0653905540000001	ECLIPSE MEDICAL IMAGING PC	2/3/2020	NF-3 Bill Form / HCFA 1500 Form	12/22/2019	72040	\$ 72.20
1595	0509164550101027	ECLIPSE MEDICAL IMAGING PC	2/3/2020	NF-3 Bill Form / HCFA 1500 Form	12/22/2019	72141	\$ 659.79
1596	0509164550101027	ECLIPSE MEDICAL IMAGING PC	2/3/2020	NF-3 Bill Form / HCFA 1500 Form	12/22/2019	72148	\$ 912.00
1597	0289288740101061	ECLIPSE MEDICAL IMAGING PC	2/3/2020	NF-3 Bill Form / HCFA 1500 Form	12/19/2019	72141	\$ 879.73
1598	0665146310000002	ECLIPSE MEDICAL IMAGING PC	2/5/2020	NF-3 Bill Form / HCFA 1500 Form	12/23/2019	72141	\$ 659.79
1599	0665146310000002	ECLIPSE MEDICAL IMAGING PC	2/5/2020	NF-3 Bill Form / HCFA 1500 Form	12/23/2019	72148	\$ 912.00
1600	0595725730101016	ECLIPSE MEDICAL IMAGING PC	2/5/2020	NF-3 Bill Form / HCFA 1500 Form	12/23/2019	72100	\$ 65.86
1601	0595725730101016	ECLIPSE MEDICAL IMAGING PC	2/5/2020	NF-3 Bill Form / HCFA 1500 Form	12/23/2019	72070	\$ 69.82
1602	0595725730101016	ECLIPSE MEDICAL IMAGING PC	2/5/2020	NF-3 Bill Form / HCFA 1500 Form	12/23/2019	72040	\$ 72.20
1603	0595725730101016	ECLIPSE MEDICAL IMAGING PC	2/5/2020	NF-3 Bill Form / HCFA 1500 Form	12/23/2019	72148	\$ 912.00
1604	0595725730101016	ECLIPSE MEDICAL IMAGING PC	2/5/2020	NF-3 Bill Form / HCFA 1500 Form	12/23/2019	73560	\$ 55.54
1605	0595725730101016	ECLIPSE MEDICAL IMAGING PC	2/5/2020	NF-3 Bill Form / HCFA 1500 Form	12/23/2019	72141	\$ 659.79
1606	0543473080101029	ECLIPSE MEDICAL IMAGING PC	2/7/2020	NF-3 Bill Form / HCFA 1500 Form	12/24/2019	72148	\$ 912.00
1607	0289349500101013	ECLIPSE MEDICAL IMAGING PC	2/7/2020	NF-3 Bill Form / HCFA 1500 Form	12/24/2019	73560	\$ 55.54
1608	0289349500101013	ECLIPSE MEDICAL IMAGING PC	2/7/2020	NF-3 Bill Form / HCFA 1500 Form	12/24/2019	73221	\$ 878.67
1609	0666133980000001	ECLIPSE MEDICAL IMAGING PC	2/10/2020	NF-3 Bill Form / HCFA 1500 Form	12/27/2019	73221	\$ 659.00
1610	0666133980000001	ECLIPSE MEDICAL IMAGING PC	2/10/2020	NF-3 Bill Form / HCFA 1500 Form	12/27/2019	73721	\$ 878.67

Government Employees Insurance Company, et al v. Eclipse Medical Imaging, et al
Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
1611	0178286850101041	ECLIPSE MEDICAL IMAGING PC	2/10/2020	NF-3 Bill Form / HCFA 1500 Form	12/29/2019	73221	\$ 878.67
1612	0662379970101025	ECLIPSE MEDICAL IMAGING PC	2/10/2020	NF-3 Bill Form / HCFA 1500 Form	12/26/2019	73221	\$ 878.67
1613	0640915630101060	ECLIPSE MEDICAL IMAGING PC	2/10/2020	NF-3 Bill Form / HCFA 1500 Form	12/26/2019	73721	\$ 878.67
1614	0193900750101016	ECLIPSE MEDICAL IMAGING PC	2/10/2020	NF-3 Bill Form / HCFA 1500 Form	12/26/2019	73221	\$ 878.67
1615	0611951120101031	ECLIPSE MEDICAL IMAGING PC	2/10/2020	NF-3 Bill Form / HCFA 1500 Form	12/27/2019	72141	\$ 879.73
1616	0178286850101041	ECLIPSE MEDICAL IMAGING PC	2/10/2020	NF-3 Bill Form / HCFA 1500 Form	12/29/2019	73221	\$ 878.67
1617	0641734470000001	ECLIPSE MEDICAL IMAGING PC	2/10/2020	NF-3 Bill Form / HCFA 1500 Form	12/27/2019	73721	\$ 659.00
1618	0641734470000001	ECLIPSE MEDICAL IMAGING PC	2/10/2020	NF-3 Bill Form / HCFA 1500 Form	12/27/2019	72141	\$ 879.73
1619	0576942490101019	ECLIPSE MEDICAL IMAGING PC	2/10/2020	NF-3 Bill Form / HCFA 1500 Form	12/26/2019	73221	\$ 659.00
1620	0576942490101019	ECLIPSE MEDICAL IMAGING PC	2/10/2020	NF-3 Bill Form / HCFA 1500 Form	12/26/2019	73721	\$ 878.67
1621	0534734810101014	ECLIPSE MEDICAL IMAGING PC	2/10/2020	NF-3 Bill Form / HCFA 1500 Form	12/29/2019	72148	\$ 912.00
1622	0534734810101014	ECLIPSE MEDICAL IMAGING PC	2/10/2020	NF-3 Bill Form / HCFA 1500 Form	12/29/2019	72141	\$ 659.79
1623	0193900750101016	ECLIPSE MEDICAL IMAGING PC	2/10/2020	NF-3 Bill Form / HCFA 1500 Form	12/29/2019	72141	\$ 659.79
1624	0193900750101016	ECLIPSE MEDICAL IMAGING PC	2/10/2020	NF-3 Bill Form / HCFA 1500 Form	12/29/2019	72148	\$ 912.00
1625	0180021040101106	ECLIPSE MEDICAL IMAGING PC	2/10/2020	NF-3 Bill Form / HCFA 1500 Form	12/27/2019	72148	\$ 912.00
1626	0180021040101106	ECLIPSE MEDICAL IMAGING PC	2/10/2020	NF-3 Bill Form / HCFA 1500 Form	12/27/2019	73221	\$ 659.00
1627	0443321490101059	ECLIPSE MEDICAL IMAGING PC	2/13/2020	NF-3 Bill Form / HCFA 1500 Form	12/30/2019	72148	\$ 912.00
1628	0616922920000001	ECLIPSE MEDICAL IMAGING PC	2/13/2020	NF-3 Bill Form / HCFA 1500 Form	12/30/2019	73721	\$ 659.00
1629	0616922920000001	ECLIPSE MEDICAL IMAGING PC	2/13/2020	NF-3 Bill Form / HCFA 1500 Form	12/30/2019	72141	\$ 879.73
1630	0384569580101013	ECLIPSE MEDICAL IMAGING PC	2/18/2020	NF-3 Bill Form / HCFA 1500 Form	1/3/2020	73721	\$ 878.67
1631	0384569580101013	ECLIPSE MEDICAL IMAGING PC	2/18/2020	NF-3 Bill Form / HCFA 1500 Form	1/3/2020	73221	\$ 659.00
1632	0439605910000001	ECLIPSE MEDICAL IMAGING PC	2/18/2020	NF-3 Bill Form / HCFA 1500 Form	1/5/2020	73721	\$ 878.67
1633	0459751810101068	ECLIPSE MEDICAL IMAGING PC	2/18/2020	NF-3 Bill Form / HCFA 1500 Form	1/3/2020	73721	\$ 878.67
1634	0384569580101013	ECLIPSE MEDICAL IMAGING PC	2/18/2020	NF-3 Bill Form / HCFA 1500 Form	1/5/2020	73221	\$ 659.00
1635	0384569580101013	ECLIPSE MEDICAL IMAGING PC	2/18/2020	NF-3 Bill Form / HCFA 1500 Form	1/5/2020	73721	\$ 878.67
1636	0629966380000001	ECLIPSE MEDICAL IMAGING PC	2/18/2020	NF-3 Bill Form / HCFA 1500 Form	1/2/2020	73721	\$ 878.67
1637	0576942490101019	ECLIPSE MEDICAL IMAGING PC	2/18/2020	NF-3 Bill Form / HCFA 1500 Form	1/2/2020	72141	\$ 879.73
1638	0662379970101025	ECLIPSE MEDICAL IMAGING PC	2/18/2020	NF-3 Bill Form / HCFA 1500 Form	1/2/2020	72141	\$ 879.73
1639	0616922920000001	ECLIPSE MEDICAL IMAGING PC	2/18/2020	NF-3 Bill Form / HCFA 1500 Form	1/3/2020	72148	\$ 912.00
1640	0300253850101159	ECLIPSE MEDICAL IMAGING PC	2/18/2020	NF-3 Bill Form / HCFA 1500 Form	1/5/2020	72141	\$ 879.73
1641	0531154760000001	ECLIPSE MEDICAL IMAGING PC	2/24/2020	NF-3 Bill Form / HCFA 1500 Form	1/8/2020	73721	\$ 878.67
1642	0673514240000001	ECLIPSE MEDICAL IMAGING PC	2/24/2020	NF-3 Bill Form / HCFA 1500 Form	1/9/2020	73721	\$ 878.67
1643	0178286850101041	ECLIPSE MEDICAL IMAGING PC	2/24/2020	NF-3 Bill Form / HCFA 1500 Form	1/12/2020	72141	\$ 879.73
1644	0648209790000001	ECLIPSE MEDICAL IMAGING PC	2/24/2020	NF-3 Bill Form / HCFA 1500 Form	1/8/2020	72141	\$ 659.79
1645	0648209790000001	ECLIPSE MEDICAL IMAGING PC	2/24/2020	NF-3 Bill Form / HCFA 1500 Form	1/8/2020	72148	\$ 912.00
1646	0664899810000001	ECLIPSE MEDICAL IMAGING PC	2/24/2020	NF-3 Bill Form / HCFA 1500 Form	1/8/2020	72148	\$ 912.00
1647	0664899810000001	ECLIPSE MEDICAL IMAGING PC	2/24/2020	NF-3 Bill Form / HCFA 1500 Form	1/8/2020	72141	\$ 659.79
1648	0595725730101016	ECLIPSE MEDICAL IMAGING PC	2/24/2020	NF-3 Bill Form / HCFA 1500 Form	1/12/2020	73221	\$ 878.67
1649	0456533710000001	ECLIPSE MEDICAL IMAGING PC	2/24/2020	NF-3 Bill Form / HCFA 1500 Form	1/13/2020	73721	\$ 659.00
1650	0456533710000001	ECLIPSE MEDICAL IMAGING PC	2/24/2020	NF-3 Bill Form / HCFA 1500 Form	1/13/2020	72141	\$ 879.73
1651	0362660100101058	ECLIPSE MEDICAL IMAGING PC	2/24/2020	NF-3 Bill Form / HCFA 1500 Form	1/13/2020	73721	\$ 878.67
1652	0476595960101041	ECLIPSE MEDICAL IMAGING PC	2/24/2020	NF-3 Bill Form / HCFA 1500 Form	1/13/2020	72070	\$ 69.82
1653	0476595960101041	ECLIPSE MEDICAL IMAGING PC	2/24/2020	NF-3 Bill Form / HCFA 1500 Form	1/13/2020	73030	\$ 71.02
1654	0476595960101041	ECLIPSE MEDICAL IMAGING PC	2/24/2020	NF-3 Bill Form / HCFA 1500 Form	1/13/2020	72040	\$ 96.27
1655	0603580360101011	ECLIPSE MEDICAL IMAGING PC	2/24/2020	NF-3 Bill Form / HCFA 1500 Form	1/7/2020	72100	\$ 65.86
1656	0603580360101011	ECLIPSE MEDICAL IMAGING PC	2/24/2020	NF-3 Bill Form / HCFA 1500 Form	1/7/2020	73030	\$ 71.02
1657	0603580360101011	ECLIPSE MEDICAL IMAGING PC	2/24/2020	NF-3 Bill Form / HCFA 1500 Form	1/7/2020	73560	\$ 55.54
1658	0603580360101011	ECLIPSE MEDICAL IMAGING PC	2/24/2020	NF-3 Bill Form / HCFA 1500 Form	1/7/2020	73560	\$ 55.54
1659	0603580360101011	ECLIPSE MEDICAL IMAGING PC	2/24/2020	NF-3 Bill Form / HCFA 1500 Form	1/7/2020	73221	\$ 878.67
1660	0603580360101011	ECLIPSE MEDICAL IMAGING PC	2/24/2020	NF-3 Bill Form / HCFA 1500 Form	1/7/2020	73030	\$ 71.02
1661	0603580360101011	ECLIPSE MEDICAL IMAGING PC	2/24/2020	NF-3 Bill Form / HCFA 1500 Form	1/7/2020	73100	\$ 46.42
1662	0653905540000001	ECLIPSE MEDICAL IMAGING PC	2/24/2020	NF-3 Bill Form / HCFA 1500 Form	1/12/2020	72131	\$ 436.42
1663	0653905540000001	ECLIPSE MEDICAL IMAGING PC	2/24/2020	NF-3 Bill Form / HCFA 1500 Form	1/12/2020	72125	\$ 581.90
1664	0181777190101225	ECLIPSE MEDICAL IMAGING PC	2/24/2020	NF-3 Bill Form / HCFA 1500 Form	1/12/2020	72040	\$ 72.20
1665	0181777190101225	ECLIPSE MEDICAL IMAGING PC	2/24/2020	NF-3 Bill Form / HCFA 1500 Form	1/12/2020	72125	\$ 581.90
1666	0643072400000001	ECLIPSE MEDICAL IMAGING PC	2/24/2020	NF-3 Bill Form / HCFA 1500 Form	1/10/2020	72141	\$ 659.79
1667	0643072400000001	ECLIPSE MEDICAL IMAGING PC	2/24/2020	NF-3 Bill Form / HCFA 1500 Form	1/10/2020	72148	\$ 912.00
1668	0459751810101068	ECLIPSE MEDICAL IMAGING PC	2/24/2020	NF-3 Bill Form / HCFA 1500 Form	1/10/2020	73221	\$ 878.67
1669	0539196080101022	ECLIPSE MEDICAL IMAGING PC	2/24/2020	NF-3 Bill Form / HCFA 1500 Form	1/7/2020	72141	\$ 659.79
1670	0539196080101022	ECLIPSE MEDICAL IMAGING PC	2/24/2020	NF-3 Bill Form / HCFA 1500 Form	1/7/2020	72148	\$ 912.00
1671	0178286850101041	ECLIPSE MEDICAL IMAGING PC	2/24/2020	NF-3 Bill Form / HCFA 1500 Form	1/12/2020	72146	\$ 959.61
1672	0533108370000001	ECLIPSE MEDICAL IMAGING PC	2/25/2020	NF-3 Bill Form / HCFA 1500 Form	1/13/2020	73221	\$ 878.67
1673	8671358020000001	ECLIPSE MEDICAL IMAGING PC	2/27/2020	NF-3 Bill Form / HCFA 1500 Form	1/12/2020	73721	\$ 878.67
1674	0613522120101038	ECLIPSE MEDICAL IMAGING PC	3/2/2020	NF-3 Bill Form / HCFA 1500 Form	1/14/2020	72148	\$ 912.00
1675	0613522120101038	ECLIPSE MEDICAL IMAGING PC	3/2/2020	NF-3 Bill Form / HCFA 1500 Form	1/14/2020	72141	\$ 659.79
1676	0047736770000001	ECLIPSE MEDICAL IMAGING PC	3/2/2020	NF-3 Bill Form / HCFA 1500 Form	1/14/2020	73721	\$ 878.67
1677	0673514240000001	ECLIPSE MEDICAL IMAGING PC	3/2/2020	NF-3 Bill Form / HCFA 1500 Form	1/15/2020	73221	\$ 878.67
1678	0362660100101058	ECLIPSE MEDICAL IMAGING PC	3/2/2020	NF-3 Bill Form / HCFA 1500 Form	1/13/2020	72125	\$ 581.90
1679	0553735350101012	ECLIPSE MEDICAL IMAGING PC	3/2/2020	NF-3 Bill Form / HCFA 1500 Form	1/15/2020	72148	\$ 912.00
1680	0661536120000001	ECLIPSE MEDICAL IMAGING PC	3/2/2020	NF-3 Bill Form / HCFA 1500 Form	1/14/2020	73721	\$ 878.67

Government Employees Insurance Company, et al v. Eclipse Medical Imaging, et al
Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
1681	0460544170101076	ECLIPSE MEDICAL IMAGING PC	3/2/2020	NF-3 Bill Form / HCFA 1500 Form	1/14/2020	72148	\$ 912.00
1682	0460544170101076	ECLIPSE MEDICAL IMAGING PC	3/2/2020	NF-3 Bill Form / HCFA 1500 Form	1/14/2020	72141	\$ 659.79
1683	0648209790000001	ECLIPSE MEDICAL IMAGING PC	3/2/2020	NF-3 Bill Form / HCFA 1500 Form	1/14/2020	72100	\$ 65.86
1684	0648209790000001	ECLIPSE MEDICAL IMAGING PC	3/2/2020	NF-3 Bill Form / HCFA 1500 Form	1/14/2020	72040	\$ 96.27
1685	0648209790000001	ECLIPSE MEDICAL IMAGING PC	3/2/2020	NF-3 Bill Form / HCFA 1500 Form	1/14/2020	72070	\$ 69.82
1686	0296875260101018	ECLIPSE MEDICAL IMAGING PC	3/2/2020	NF-3 Bill Form / HCFA 1500 Form	1/19/2020	73721	\$ 878.67
1687	0539196080101022	ECLIPSE MEDICAL IMAGING PC	2/28/2020	NF-3 Bill Form / HCFA 1500 Form	1/15/2020	73221	\$ 659.00
1688	0539196080101022	ECLIPSE MEDICAL IMAGING PC	2/28/2020	NF-3 Bill Form / HCFA 1500 Form	1/15/2020	73721	\$ 878.67
1689	0205477290000001	ECLIPSE MEDICAL IMAGING PC	3/2/2020	NF-3 Bill Form / HCFA 1500 Form	1/14/2020	72141	\$ 659.79
1690	0205477290000001	ECLIPSE MEDICAL IMAGING PC	3/2/2020	NF-3 Bill Form / HCFA 1500 Form	1/14/2020	72148	\$ 912.00
1691	0384569580101013	ECLIPSE MEDICAL IMAGING PC	3/2/2020	NF-3 Bill Form / HCFA 1500 Form	1/14/2020	72040	\$ 72.20
1692	0384569580101013	ECLIPSE MEDICAL IMAGING PC	3/2/2020	NF-3 Bill Form / HCFA 1500 Form	1/14/2020	72070	\$ 69.82
1693	0384569580101013	ECLIPSE MEDICAL IMAGING PC	3/2/2020	NF-3 Bill Form / HCFA 1500 Form	1/14/2020	72148	\$ 912.00
1694	0384569580101013	ECLIPSE MEDICAL IMAGING PC	3/2/2020	NF-3 Bill Form / HCFA 1500 Form	1/14/2020	72141	\$ 659.79
1695	0384569580101013	ECLIPSE MEDICAL IMAGING PC	3/2/2020	NF-3 Bill Form / HCFA 1500 Form	1/14/2020	72100	\$ 65.86
1696	0296875260101018	ECLIPSE MEDICAL IMAGING PC	3/2/2020	NF-3 Bill Form / HCFA 1500 Form	1/16/2020	73221	\$ 878.67
1697	0422236090101050	ECLIPSE MEDICAL IMAGING PC	3/2/2020	NF-3 Bill Form / HCFA 1500 Form	1/16/2020	72040	\$ 96.27
1698	0422236090101050	ECLIPSE MEDICAL IMAGING PC	3/2/2020	NF-3 Bill Form / HCFA 1500 Form	1/16/2020	73560	\$ 55.54
1699	0422236090101050	ECLIPSE MEDICAL IMAGING PC	3/2/2020	NF-3 Bill Form / HCFA 1500 Form	1/16/2020	73030	\$ 71.02
1700	0422236090101050	ECLIPSE MEDICAL IMAGING PC	3/2/2020	NF-3 Bill Form / HCFA 1500 Form	1/16/2020	73000	\$ 62.68
1701	0422236090101050	ECLIPSE MEDICAL IMAGING PC	3/2/2020	NF-3 Bill Form / HCFA 1500 Form	1/16/2020	72070	\$ 69.82
1702	0422236090101050	ECLIPSE MEDICAL IMAGING PC	3/2/2020	NF-3 Bill Form / HCFA 1500 Form	1/16/2020	72100	\$ 65.86
1703	0673957210000001	ECLIPSE MEDICAL IMAGING PC	3/2/2020	NF-3 Bill Form / HCFA 1500 Form	1/16/2020	72148	\$ 912.00
1704	0086636940000001	ECLIPSE MEDICAL IMAGING PC	3/2/2020	NF-3 Bill Form / HCFA 1500 Form	1/16/2020	72100	\$ 65.86
1705	0086636940000001	ECLIPSE MEDICAL IMAGING PC	3/2/2020	NF-3 Bill Form / HCFA 1500 Form	1/16/2020	72040	\$ 72.20
1706	0086636940000001	ECLIPSE MEDICAL IMAGING PC	3/2/2020	NF-3 Bill Form / HCFA 1500 Form	1/16/2020	73221	\$ 659.00
1707	0086636940000001	ECLIPSE MEDICAL IMAGING PC	3/2/2020	NF-3 Bill Form / HCFA 1500 Form	1/16/2020	73721	\$ 878.67
1708	0663206370101017	ECLIPSE MEDICAL IMAGING PC	3/2/2020	NF-3 Bill Form / HCFA 1500 Form	1/16/2020	73721	\$ 878.67
1709	8671358020000001	ECLIPSE MEDICAL IMAGING PC	3/2/2020	NF-3 Bill Form / HCFA 1500 Form	1/19/2020	72148	\$ 912.00
1710	8671358020000001	ECLIPSE MEDICAL IMAGING PC	3/2/2020	NF-3 Bill Form / HCFA 1500 Form	1/19/2020	72141	\$ 659.79
1711	0660963820000002	ECLIPSE MEDICAL IMAGING PC	3/2/2020	NF-3 Bill Form / HCFA 1500 Form	1/19/2020	73221	\$ 659.00
1712	0660963820000002	ECLIPSE MEDICAL IMAGING PC	3/2/2020	NF-3 Bill Form / HCFA 1500 Form	1/19/2020	73721	\$ 878.67
1713	0660963820000002	ECLIPSE MEDICAL IMAGING PC	3/2/2020	NF-3 Bill Form / HCFA 1500 Form	1/19/2020	72100	\$ 65.86
1714	0574764780101034	ECLIPSE MEDICAL IMAGING PC	3/2/2020	NF-3 Bill Form / HCFA 1500 Form	1/17/2020	72141	\$ 659.79
1715	0574764780101034	ECLIPSE MEDICAL IMAGING PC	3/2/2020	NF-3 Bill Form / HCFA 1500 Form	1/17/2020	72148	\$ 912.00
1716	0459751810101068	ECLIPSE MEDICAL IMAGING PC	3/5/2020	NF-3 Bill Form / HCFA 1500 Form	1/21/2020	73721	\$ 659.00
1717	0459751810101068	ECLIPSE MEDICAL IMAGING PC	3/5/2020	NF-3 Bill Form / HCFA 1500 Form	1/21/2020	72148	\$ 912.00
1718	0655711970000001	ECLIPSE MEDICAL IMAGING PC	3/5/2020	NF-3 Bill Form / HCFA 1500 Form	1/20/2020	73221	\$ 878.67
1719	0362660100101058	ECLIPSE MEDICAL IMAGING PC	3/5/2020	NF-3 Bill Form / HCFA 1500 Form	1/20/2020	72131	\$ 581.90
1720	0645202900000001	ECLIPSE MEDICAL IMAGING PC	3/5/2020	NF-3 Bill Form / HCFA 1500 Form	1/20/2020	70551	\$ 655.83
1721	0645202900000001	ECLIPSE MEDICAL IMAGING PC	3/5/2020	NF-3 Bill Form / HCFA 1500 Form	1/20/2020	72148	\$ 912.00
1722	0655711970000001	ECLIPSE MEDICAL IMAGING PC	3/5/2020	NF-3 Bill Form / HCFA 1500 Form	1/20/2020	73221	\$ 878.67
1723	0666133980000001	ECLIPSE MEDICAL IMAGING PC	3/5/2020	NF-3 Bill Form / HCFA 1500 Form	1/21/2020	72141	\$ 659.79
1724	0666133980000001	ECLIPSE MEDICAL IMAGING PC	3/5/2020	NF-3 Bill Form / HCFA 1500 Form	1/21/2020	72148	\$ 912.00
1725	0672798570000001	ECLIPSE MEDICAL IMAGING PC	3/9/2020	NF-3 Bill Form / HCFA 1500 Form	1/23/2020	73721	\$ 878.67
1726	0647271800101013	ECLIPSE MEDICAL IMAGING PC	3/9/2020	NF-3 Bill Form / HCFA 1500 Form	1/23/2020	72148	\$ 912.00
1727	0647271800101013	ECLIPSE MEDICAL IMAGING PC	3/9/2020	NF-3 Bill Form / HCFA 1500 Form	1/23/2020	73221	\$ 659.00
1728	0575492660101028	ECLIPSE MEDICAL IMAGING PC	3/9/2020	NF-3 Bill Form / HCFA 1500 Form	1/27/2020	72148	\$ 912.00
1729	0575492660101028	ECLIPSE MEDICAL IMAGING PC	3/9/2020	NF-3 Bill Form / HCFA 1500 Form	1/27/2020	72131	\$ 581.90
1730	0178286850101041	ECLIPSE MEDICAL IMAGING PC	3/9/2020	NF-3 Bill Form / HCFA 1500 Form	1/26/2020	72146	\$ 959.61
1731	0556318800101038	ECLIPSE MEDICAL IMAGING PC	3/9/2020	NF-3 Bill Form / HCFA 1500 Form	1/27/2020	73721	\$ 878.67
1732	0640973400101032	ECLIPSE MEDICAL IMAGING PC	3/9/2020	NF-3 Bill Form / HCFA 1500 Form	1/26/2020	72141	\$ 659.79
1733	0640973400101032	ECLIPSE MEDICAL IMAGING PC	3/9/2020	NF-3 Bill Form / HCFA 1500 Form	1/26/2020	72148	\$ 912.00
1734	0178286850101041	ECLIPSE MEDICAL IMAGING PC	3/9/2020	NF-3 Bill Form / HCFA 1500 Form	1/26/2020	72148	\$ 912.00
1735	0641734470000001	ECLIPSE MEDICAL IMAGING PC	3/9/2020	NF-3 Bill Form / HCFA 1500 Form	1/26/2020	72148	\$ 912.00
1736	0578741120101036	ECLIPSE MEDICAL IMAGING PC	3/13/2020	NF-3 Bill Form / HCFA 1500 Form	12/13/2019	72146	\$ 959.61
1737	0629388140101024	ECLIPSE MEDICAL IMAGING PC	3/16/2020	NF-3 Bill Form / HCFA 1500 Form	1/28/2020	73221	\$ 878.67
1738	0575492660101028	ECLIPSE MEDICAL IMAGING PC	3/16/2020	NF-3 Bill Form / HCFA 1500 Form	1/29/2020	72125	\$ 581.90
1739	0593670650000001	ECLIPSE MEDICAL IMAGING PC	3/16/2020	NF-3 Bill Form / HCFA 1500 Form	1/28/2020	73221	\$ 878.67
1740	0647271800101013	ECLIPSE MEDICAL IMAGING PC	3/16/2020	NF-3 Bill Form / HCFA 1500 Form	1/29/2020	72146	\$ 959.61
1741	0647271800101013	ECLIPSE MEDICAL IMAGING PC	3/16/2020	NF-3 Bill Form / HCFA 1500 Form	1/29/2020	73221	\$ 659.00
1742	0566867400000001	ECLIPSE MEDICAL IMAGING PC	3/16/2020	NF-3 Bill Form / HCFA 1500 Form	1/28/2020	73221	\$ 878.67
1743	0645202900000001	ECLIPSE MEDICAL IMAGING PC	3/16/2020	NF-3 Bill Form / HCFA 1500 Form	1/31/2020	73721	\$ 659.00
1744	0645202900000001	ECLIPSE MEDICAL IMAGING PC	3/16/2020	NF-3 Bill Form / HCFA 1500 Form	1/31/2020	72141	\$ 879.73
1745	0609019050101020	ECLIPSE MEDICAL IMAGING PC	3/16/2020	NF-3 Bill Form / HCFA 1500 Form	1/30/2020	72141	\$ 879.73
1746	0456533710000001	ECLIPSE MEDICAL IMAGING PC	3/16/2020	NF-3 Bill Form / HCFA 1500 Form	1/29/2020	72148	\$ 912.00
1747	0086636940000001	ECLIPSE MEDICAL IMAGING PC	3/16/2020	NF-3 Bill Form / HCFA 1500 Form	1/28/2020	72148	\$ 912.00
1748	0086636940000001	ECLIPSE MEDICAL IMAGING PC	3/16/2020	NF-3 Bill Form / HCFA 1500 Form	1/28/2020	72141	\$ 659.79
1749	0575896090101012	ECLIPSE MEDICAL IMAGING PC	3/17/2020	NF-3 Bill Form / HCFA 1500 Form	1/31/2020	72148	\$ 912.00
1750	0476595960101041	ECLIPSE MEDICAL IMAGING PC	3/17/2020	NF-3 Bill Form / HCFA 1500 Form	1/31/2020	73221	\$ 878.67

Government Employees Insurance Company, et al v. Eclipse Medical Imaging, et al
Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
1751	0449305470101017	ECLIPSE MEDICAL IMAGING PC	3/17/2020	NF-3 Bill Form / HCFA 1500 Form	1/30/2020	72131	\$ 581.90
1752	0526665310101015	ECLIPSE MEDICAL IMAGING PC	3/17/2020	NF-3 Bill Form / HCFA 1500 Form	1/31/2020	72148	\$ 912.00
1753	0526665310101015	ECLIPSE MEDICAL IMAGING PC	3/17/2020	NF-3 Bill Form / HCFA 1500 Form	1/31/2020	72141	\$ 659.79
1754	0500375820000001	ECLIPSE MEDICAL IMAGING PC	3/19/2020	NF-3 Bill Form / HCFA 1500 Form	2/3/2020	73721	\$ 878.67
1755	0532838640101029	ECLIPSE MEDICAL IMAGING PC	3/19/2020	NF-3 Bill Form / HCFA 1500 Form	2/3/2020	73721	\$ 878.67
1756	0412221690101014	ECLIPSE MEDICAL IMAGING PC	3/19/2020	NF-3 Bill Form / HCFA 1500 Form	2/2/2020	72141	\$ 659.79
1757	0412221690101014	ECLIPSE MEDICAL IMAGING PC	3/19/2020	NF-3 Bill Form / HCFA 1500 Form	2/2/2020	72148	\$ 912.00
1758	0422236090101050	ECLIPSE MEDICAL IMAGING PC	3/20/2020	NF-3 Bill Form / HCFA 1500 Form	2/3/2020	73221	\$ 659.00
1759	0422236090101050	ECLIPSE MEDICAL IMAGING PC	3/20/2020	NF-3 Bill Form / HCFA 1500 Form	2/3/2020	72146	\$ 959.61
1760	0526665310101015	ECLIPSE MEDICAL IMAGING PC	3/20/2020	NF-3 Bill Form / HCFA 1500 Form	2/3/2020	72146	\$ 959.61
1761	0556519410101050	ECLIPSE MEDICAL IMAGING PC	3/20/2020	NF-3 Bill Form / HCFA 1500 Form	2/3/2020	73221	\$ 878.67
1762	0556519410101050	ECLIPSE MEDICAL IMAGING PC	3/20/2020	NF-3 Bill Form / HCFA 1500 Form	2/3/2020	73721	\$ 659.00
1763	0647271800101013	ECLIPSE MEDICAL IMAGING PC	3/20/2020	NF-3 Bill Form / HCFA 1500 Form	2/3/2020	72141	\$ 879.73
1764	0674768100000001	ECLIPSE MEDICAL IMAGING PC	3/20/2020	NF-3 Bill Form / HCFA 1500 Form	2/2/2020	72148	\$ 912.00
1765	0674768100000001	ECLIPSE MEDICAL IMAGING PC	3/20/2020	NF-3 Bill Form / HCFA 1500 Form	2/2/2020	72141	\$ 659.79
1766	0673514240000001	ECLIPSE MEDICAL IMAGING PC	3/23/2020	NF-3 Bill Form / HCFA 1500 Form	2/5/2020	72148	\$ 912.00
1767	0673514240000001	ECLIPSE MEDICAL IMAGING PC	3/23/2020	NF-3 Bill Form / HCFA 1500 Form	2/5/2020	72141	\$ 659.79
1768	0665703730000001	ECLIPSE MEDICAL IMAGING PC	3/23/2020	NF-3 Bill Form / HCFA 1500 Form	2/6/2020	73221	\$ 878.67
1769	0556519410101050	ECLIPSE MEDICAL IMAGING PC	3/23/2020	NF-3 Bill Form / HCFA 1500 Form	2/5/2020	72141	\$ 659.79
1770	0556519410101050	ECLIPSE MEDICAL IMAGING PC	3/23/2020	NF-3 Bill Form / HCFA 1500 Form	2/5/2020	72148	\$ 912.00
1771	0459751810101068	ECLIPSE MEDICAL IMAGING PC	3/23/2020	NF-3 Bill Form / HCFA 1500 Form	2/4/2020	72148	\$ 912.00
1772	0459751810101068	ECLIPSE MEDICAL IMAGING PC	3/23/2020	NF-3 Bill Form / HCFA 1500 Form	2/4/2020	72141	\$ 659.79
1773	0296875260101018	ECLIPSE MEDICAL IMAGING PC	3/23/2020	NF-3 Bill Form / HCFA 1500 Form	2/9/2020	72141	\$ 659.79
1774	0296875260101018	ECLIPSE MEDICAL IMAGING PC	3/23/2020	NF-3 Bill Form / HCFA 1500 Form	2/9/2020	72148	\$ 912.00
1775	0673723890000001	ECLIPSE MEDICAL IMAGING PC	3/23/2020	NF-3 Bill Form / HCFA 1500 Form	2/4/2020	72148	\$ 912.00
1776	0629388140101024	ECLIPSE MEDICAL IMAGING PC	3/23/2020	NF-3 Bill Form / HCFA 1500 Form	2/4/2020	73221	\$ 878.67
1777	0130121480101243	ECLIPSE MEDICAL IMAGING PC	3/23/2020	NF-3 Bill Form / HCFA 1500 Form	2/9/2020	73721	\$ 878.67
1778	0130121480101243	ECLIPSE MEDICAL IMAGING PC	3/23/2020	NF-3 Bill Form / HCFA 1500 Form	2/9/2020	70551	\$ 655.83
1779	0412221690101014	ECLIPSE MEDICAL IMAGING PC	3/23/2020	NF-3 Bill Form / HCFA 1500 Form	2/4/2020	72146	\$ 959.61
1780	0453190970101137	ECLIPSE MEDICAL IMAGING PC	3/23/2020	NF-3 Bill Form / HCFA 1500 Form	2/6/2020	72125	\$ 436.42
1781	0453190970101137	ECLIPSE MEDICAL IMAGING PC	3/23/2020	NF-3 Bill Form / HCFA 1500 Form	2/6/2020	72131	\$ 581.90
1782	0575896090101012	ECLIPSE MEDICAL IMAGING PC	3/23/2020	NF-3 Bill Form / HCFA 1500 Form	2/7/2020	72148	\$ 912.00
1783	0575896090101012	ECLIPSE MEDICAL IMAGING PC	3/23/2020	NF-3 Bill Form / HCFA 1500 Form	2/7/2020	72141	\$ 879.73
1784	0660963820000002	ECLIPSE MEDICAL IMAGING PC	3/23/2020	NF-3 Bill Form / HCFA 1500 Form	2/9/2020	72148	\$ 912.00
1785	0595725730101016	ECLIPSE MEDICAL IMAGING PC	3/23/2020	NF-3 Bill Form / HCFA 1500 Form	2/9/2020	73721	\$ 878.67
1786	0674768100000001	ECLIPSE MEDICAL IMAGING PC	3/23/2020	NF-3 Bill Form / HCFA 1500 Form	2/7/2020	72146	\$ 959.61
1787	0231487080101026	ECLIPSE MEDICAL IMAGING PC	3/23/2020	NF-3 Bill Form / HCFA 1500 Form	2/9/2020	73221	\$ 878.67
1788	0590821360101090	ECLIPSE MEDICAL IMAGING PC	3/23/2020	NF-3 Bill Form / HCFA 1500 Form	2/10/2020	73721	\$ 878.67
1789	0338203210101022	ECLIPSE MEDICAL IMAGING PC	3/23/2020	NF-3 Bill Form / HCFA 1500 Form	2/10/2020	70551	\$ 874.44
1790	0664152150101019	ECLIPSE MEDICAL IMAGING PC	3/23/2020	NF-3 Bill Form / HCFA 1500 Form	2/9/2020	73221	\$ 878.67
1791	0283710390000002	ECLIPSE MEDICAL IMAGING PC	3/23/2020	NF-3 Bill Form / HCFA 1500 Form	2/4/2020	73110	\$ 52.77
1792	0283710390000002	ECLIPSE MEDICAL IMAGING PC	3/23/2020	NF-3 Bill Form / HCFA 1500 Form	2/4/2020	73120	\$ 47.61
1793	0283710390000002	ECLIPSE MEDICAL IMAGING PC	3/23/2020	NF-3 Bill Form / HCFA 1500 Form	2/4/2020	73718	\$ 901.42
1794	0283710390000002	ECLIPSE MEDICAL IMAGING PC	3/23/2020	NF-3 Bill Form / HCFA 1500 Form	2/4/2020	73110	\$ 52.77
1795	0283710390000002	ECLIPSE MEDICAL IMAGING PC	3/23/2020	NF-3 Bill Form / HCFA 1500 Form	2/4/2020	73120	\$ 47.61
1796	0636535680000002	ECLIPSE MEDICAL IMAGING PC	3/23/2020	NF-3 Bill Form / HCFA 1500 Form	2/4/2020	73721	\$ 878.67
1797	0631438150101030	ECLIPSE MEDICAL IMAGING PC	3/23/2020	NF-3 Bill Form / HCFA 1500 Form	2/4/2020	70551	\$ 655.83
1798	0631438150101030	ECLIPSE MEDICAL IMAGING PC	3/23/2020	NF-3 Bill Form / HCFA 1500 Form	2/4/2020	72146	\$ 959.61
1799	0422236090101050	ECLIPSE MEDICAL IMAGING PC	3/25/2020	NF-3 Bill Form / HCFA 1500 Form	2/10/2020	72148	\$ 912.00
1800	0422236090101050	ECLIPSE MEDICAL IMAGING PC	3/25/2020	NF-3 Bill Form / HCFA 1500 Form	2/10/2020	72141	\$ 659.79
1801	0140225200101074	ECLIPSE MEDICAL IMAGING PC	3/23/2020	NF-3 Bill Form / HCFA 1500 Form	2/4/2020	72070	\$ 69.82
1802	0140225200101074	ECLIPSE MEDICAL IMAGING PC	3/23/2020	NF-3 Bill Form / HCFA 1500 Form	2/4/2020	72146	\$ 959.61
1803	0283710390000002	ECLIPSE MEDICAL IMAGING PC	5/12/2020	NF-3 Bill Form / HCFA 1500 Form	2/12/2020	72192	\$ 486.68
1804	0385502170101043	ECLIPSE MEDICAL IMAGING PC	5/12/2020	NF-3 Bill Form / HCFA 1500 Form	2/12/2020	73721	\$ 878.67
1805	0564005280101021	ECLIPSE MEDICAL IMAGING PC	5/12/2020	NF-3 Bill Form / HCFA 1500 Form	2/12/2020	73221	\$ 659.00
1806	0564005280101021	ECLIPSE MEDICAL IMAGING PC	5/12/2020	NF-3 Bill Form / HCFA 1500 Form	2/12/2020	72148	\$ 912.00
1807	0622823990000001	ECLIPSE MEDICAL IMAGING PC	5/12/2020	NF-3 Bill Form / HCFA 1500 Form	2/13/2020	73221	\$ 878.67
1808	0100271280101145	ECLIPSE MEDICAL IMAGING PC	5/12/2020	NF-3 Bill Form / HCFA 1500 Form	2/12/2020	73110	\$ 70.36
1809	0591517240101039	ECLIPSE MEDICAL IMAGING PC	5/12/2020	NF-3 Bill Form / HCFA 1500 Form	2/11/2020	73221	\$ 878.67
1810	0591517240101039	ECLIPSE MEDICAL IMAGING PC	5/12/2020	NF-3 Bill Form / HCFA 1500 Form	2/11/2020	73721	\$ 659.00
1811	0580680300101038	ECLIPSE MEDICAL IMAGING PC	5/12/2020	NF-3 Bill Form / HCFA 1500 Form	2/13/2020	72141	\$ 879.73
1812	0580680300101038	ECLIPSE MEDICAL IMAGING PC	5/14/2020	NF-3 Bill Form / HCFA 1500 Form	2/11/2020	73070	\$ 52.77
1813	0580680300101038	ECLIPSE MEDICAL IMAGING PC	5/14/2020	NF-3 Bill Form / HCFA 1500 Form	2/11/2020	70551	\$ 655.83
1814	0580680300101038	ECLIPSE MEDICAL IMAGING PC	5/14/2020	NF-3 Bill Form / HCFA 1500 Form	2/11/2020	73030	\$ 71.02
1815	0580680300101038	ECLIPSE MEDICAL IMAGING PC	5/14/2020	NF-3 Bill Form / HCFA 1500 Form	2/11/2020	70250	\$ 65.90
1816	0580680300101038	ECLIPSE MEDICAL IMAGING PC	5/14/2020	NF-3 Bill Form / HCFA 1500 Form	2/11/2020	73221	\$ 878.67
1817	0580680300101038	ECLIPSE MEDICAL IMAGING PC	5/14/2020	NF-3 Bill Form / HCFA 1500 Form	2/11/2020	72040	\$ 72.20
1818	0636535680000002	ECLIPSE MEDICAL IMAGING PC	5/19/2020	NF-3 Bill Form / HCFA 1500 Form	2/18/2020	72148	\$ 912.00
1819	0636535680000002	ECLIPSE MEDICAL IMAGING PC	5/19/2020	NF-3 Bill Form / HCFA 1500 Form	2/18/2020	72141	\$ 659.79
1820	0182406220101315	ECLIPSE MEDICAL IMAGING PC	5/19/2020	NF-3 Bill Form / HCFA 1500 Form	2/14/2020	72148	\$ 912.00

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Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
1821	0182406220101315	ECLIPSE MEDICAL IMAGING PC	5/19/2020	NF-3 Bill Form / HCFA 1500 Form	2/17/2020	73221	\$ 878.67
1822	0511425390101014	ECLIPSE MEDICAL IMAGING PC	5/19/2020	NF-3 Bill Form / HCFA 1500 Form	2/18/2020	73221	\$ 878.67
1823	0511425390101014	ECLIPSE MEDICAL IMAGING PC	5/19/2020	NF-3 Bill Form / HCFA 1500 Form	2/18/2020	73721	\$ 659.00
1824	0590821360101090	ECLIPSE MEDICAL IMAGING PC	5/19/2020	NF-3 Bill Form / HCFA 1500 Form	2/18/2020	72148	\$ 912.00
1825	0590821360101090	ECLIPSE MEDICAL IMAGING PC	5/19/2020	NF-3 Bill Form / HCFA 1500 Form	2/18/2020	72141	\$ 659.79
1826	0182406220101315	ECLIPSE MEDICAL IMAGING PC	5/19/2020	NF-3 Bill Form / HCFA 1500 Form	2/14/2020	73221	\$ 878.67
1827	0641886510000001	ECLIPSE MEDICAL IMAGING PC	5/19/2020	NF-3 Bill Form / HCFA 1500 Form	2/14/2020	73221	\$ 878.67
1828	0622823990000001	ECLIPSE MEDICAL IMAGING PC	5/19/2020	NF-3 Bill Form / HCFA 1500 Form	2/18/2020	72141	\$ 879.73
1829	0313357530101052	ECLIPSE MEDICAL IMAGING PC	5/19/2020	NF-3 Bill Form / HCFA 1500 Form	2/16/2020	73221	\$ 878.67
1830	0313357530101052	ECLIPSE MEDICAL IMAGING PC	5/19/2020	NF-3 Bill Form / HCFA 1500 Form	2/16/2020	73721	\$ 659.00
1831	0130121480101243	ECLIPSE MEDICAL IMAGING PC	5/19/2020	NF-3 Bill Form / HCFA 1500 Form	2/16/2020	72146	\$ 959.61
1832	0130121480101243	ECLIPSE MEDICAL IMAGING PC	5/19/2020	NF-3 Bill Form / HCFA 1500 Form	2/16/2020	73221	\$ 659.00
1833	0509164550101027	ECLIPSE MEDICAL IMAGING PC	5/19/2020	NF-3 Bill Form / HCFA 1500 Form	2/14/2020	73721	\$ 878.87
1834	0655228320105014	ECLIPSE MEDICAL IMAGING PC	5/22/2020	NF-3 Bill Form / HCFA 1500 Form	2/16/2020	73030	\$ 71.02
1835	0655228320105014	ECLIPSE MEDICAL IMAGING PC	5/22/2020	NF-3 Bill Form / HCFA 1500 Form	2/16/2020	72070	\$ 69.82
1836	0655228320105014	ECLIPSE MEDICAL IMAGING PC	5/22/2020	NF-3 Bill Form / HCFA 1500 Form	2/16/2020	73140	\$ 40.06
1837	0655228320105014	ECLIPSE MEDICAL IMAGING PC	5/22/2020	NF-3 Bill Form / HCFA 1500 Form	2/16/2020	72040	\$ 72.20
1838	0655228320105014	ECLIPSE MEDICAL IMAGING PC	5/22/2020	NF-3 Bill Form / HCFA 1500 Form	2/16/2020	73721	\$ 878.67
1839	0655228320105014	ECLIPSE MEDICAL IMAGING PC	5/22/2020	NF-3 Bill Form / HCFA 1500 Form	2/16/2020	73721	\$ 55.54
1840	0655228320105014	ECLIPSE MEDICAL IMAGING PC	5/22/2020	NF-3 Bill Form / HCFA 1500 Form	2/16/2020	72100	\$ 65.86
1841	0655228320105014	ECLIPSE MEDICAL IMAGING PC	5/22/2020	NF-3 Bill Form / HCFA 1500 Form	2/16/2020	71110	\$ 80.94
1842	0655228320105014	ECLIPSE MEDICAL IMAGING PC	5/22/2020	NF-3 Bill Form / HCFA 1500 Form	2/16/2020	73600	\$ 54.75
1843	0655228320105014	ECLIPSE MEDICAL IMAGING PC	5/22/2020	NF-3 Bill Form / HCFA 1500 Form	2/16/2020	73120	\$ 47.61
1844	0622823990000001	ECLIPSE MEDICAL IMAGING PC	5/26/2020	NF-3 Bill Form / HCFA 1500 Form	2/23/2020	72148	\$ 912.00
1845	0182406220101315	ECLIPSE MEDICAL IMAGING PC	5/26/2020	NF-3 Bill Form / HCFA 1500 Form	2/19/2020	73221	\$ 659.00
1846	0182406220101315	ECLIPSE MEDICAL IMAGING PC	5/26/2020	NF-3 Bill Form / HCFA 1500 Form	2/19/2020	72148	\$ 912.00
1847	0673611120000001	ECLIPSE MEDICAL IMAGING PC	5/26/2020	NF-3 Bill Form / HCFA 1500 Form	2/21/2020	73221	\$ 878.67
1848	0511425390101014	ECLIPSE MEDICAL IMAGING PC	5/26/2020	NF-3 Bill Form / HCFA 1500 Form	2/23/2020	73721	\$ 878.67
1849	0511425390101014	ECLIPSE MEDICAL IMAGING PC	5/26/2020	NF-3 Bill Form / HCFA 1500 Form	2/23/2020	73221	\$ 659.00
1850	0313357530101052	ECLIPSE MEDICAL IMAGING PC	5/26/2020	NF-3 Bill Form / HCFA 1500 Form	2/23/2020	73221	\$ 659.00
1851	0313357530101052	ECLIPSE MEDICAL IMAGING PC	5/26/2020	NF-3 Bill Form / HCFA 1500 Form	2/23/2020	73721	\$ 878.67
1852	0631438150101030	ECLIPSE MEDICAL IMAGING PC	5/26/2020	NF-3 Bill Form / HCFA 1500 Form	2/19/2020	72141	\$ 659.79
1853	0631438150101030	ECLIPSE MEDICAL IMAGING PC	5/26/2020	NF-3 Bill Form / HCFA 1500 Form	2/19/2020	72148	\$ 912.00
1854	0182406220101315	ECLIPSE MEDICAL IMAGING PC	5/26/2020	NF-3 Bill Form / HCFA 1500 Form	2/21/2020	72141	\$ 879.73
1855	0564005280101021	ECLIPSE MEDICAL IMAGING PC	5/26/2020	NF-3 Bill Form / HCFA 1500 Form	2/21/2020	73221	\$ 878.67
1856	0641886510000001	ECLIPSE MEDICAL IMAGING PC	5/29/2020	NF-3 Bill Form / HCFA 1500 Form	2/19/2020	73221	\$ 878.67
1857	0283710390000002	ECLIPSE MEDICAL IMAGING PC	6/1/2020	NF-3 Bill Form / HCFA 1500 Form	2/20/2020	72141	\$ 659.79
1858	0283710390000002	ECLIPSE MEDICAL IMAGING PC	6/1/2020	NF-3 Bill Form / HCFA 1500 Form	2/20/2020	72148	\$ 912.00
1859	0633292200000001	ECLIPSE MEDICAL IMAGING PC	6/1/2020	NF-3 Bill Form / HCFA 1500 Form	2/26/2020	72146	\$ 959.61
1860	0422476890101036	ECLIPSE MEDICAL IMAGING PC	6/1/2020	NF-3 Bill Form / HCFA 1500 Form	3/3/2020	73221	\$ 878.67
1861	0641886510000001	ECLIPSE MEDICAL IMAGING PC	6/1/2020	NF-3 Bill Form / HCFA 1500 Form	3/4/2020	72148	\$ 912.00
1862	0641886510000001	ECLIPSE MEDICAL IMAGING PC	6/1/2020	NF-3 Bill Form / HCFA 1500 Form	3/4/2020	72141	\$ 659.79
1863	0289349500101013	ECLIPSE MEDICAL IMAGING PC	6/1/2020	NF-3 Bill Form / HCFA 1500 Form	2/28/2020	72141	\$ 659.79
1864	0289349500101013	ECLIPSE MEDICAL IMAGING PC	6/1/2020	NF-3 Bill Form / HCFA 1500 Form	2/28/2020	72148	\$ 912.00
1865	0140225200101074	ECLIPSE MEDICAL IMAGING PC	6/1/2020	NF-3 Bill Form / HCFA 1500 Form	3/4/2020	72148	\$ 912.00
1866	0528463580101024	ECLIPSE MEDICAL IMAGING PC	6/1/2020	NF-3 Bill Form / HCFA 1500 Form	2/20/2020	72141	\$ 659.79
1867	0528463580101024	ECLIPSE MEDICAL IMAGING PC	6/1/2020	NF-3 Bill Form / HCFA 1500 Form	2/20/2020	72148	\$ 912.00
1868	0464870080000001	ECLIPSE MEDICAL IMAGING PC	6/1/2020	NF-3 Bill Form / HCFA 1500 Form	2/28/2020	73721	\$ 878.67
1869	0677043600000001	ECLIPSE MEDICAL IMAGING PC	6/1/2020	NF-3 Bill Form / HCFA 1500 Form	2/24/2020	73721	\$ 878.67
1870	0503733750000001	ECLIPSE MEDICAL IMAGING PC	6/1/2020	NF-3 Bill Form / HCFA 1500 Form	2/27/2020	70551	\$ 655.83
1871	0503733750000001	ECLIPSE MEDICAL IMAGING PC	6/1/2020	NF-3 Bill Form / HCFA 1500 Form	2/27/2020	73721	\$ 878.67
1872	0655228320105014	ECLIPSE MEDICAL IMAGING PC	6/1/2020	NF-3 Bill Form / HCFA 1500 Form	3/1/2020	73221	\$ 878.67
1873	0511425390101014	ECLIPSE MEDICAL IMAGING PC	6/1/2020	NF-3 Bill Form / HCFA 1500 Form	2/27/2020	73221	\$ 659.00
1874	0511425390101014	ECLIPSE MEDICAL IMAGING PC	6/1/2020	NF-3 Bill Form / HCFA 1500 Form	2/27/2020	72141	\$ 879.73
1875	0532838640101029	ECLIPSE MEDICAL IMAGING PC	6/1/2020	NF-3 Bill Form / HCFA 1500 Form	2/27/2020	72148	\$ 912.00
1876	0488966730101023	ECLIPSE MEDICAL IMAGING PC	6/1/2020	NF-3 Bill Form / HCFA 1500 Form	2/20/2020	73221	\$ 878.67
1877	0588505410101017	ECLIPSE MEDICAL IMAGING PC	6/1/2020	NF-3 Bill Form / HCFA 1500 Form	2/28/2020	72148	\$ 912.00
1878	0639575010000001	ECLIPSE MEDICAL IMAGING PC	6/1/2020	NF-3 Bill Form / HCFA 1500 Form	2/20/2020	73721	\$ 659.00
1879	0639575010000001	ECLIPSE MEDICAL IMAGING PC	6/1/2020	NF-3 Bill Form / HCFA 1500 Form	2/20/2020	72146	\$ 959.61
1880	0182406220101315	ECLIPSE MEDICAL IMAGING PC	6/1/2020	NF-3 Bill Form / HCFA 1500 Form	2/20/2020	73221	\$ 878.67
1881	0564005280101021	ECLIPSE MEDICAL IMAGING PC	6/1/2020	NF-3 Bill Form / HCFA 1500 Form	2/25/2020	72141	\$ 879.73
1882	0532838640101029	ECLIPSE MEDICAL IMAGING PC	6/1/2020	NF-3 Bill Form / HCFA 1500 Form	2/26/2020	72141	\$ 879.73
1883	0129154930101094	ECLIPSE MEDICAL IMAGING PC	6/1/2020	NF-3 Bill Form / HCFA 1500 Form	2/24/2020	73221	\$ 878.67
1884	0313357530101052	ECLIPSE MEDICAL IMAGING PC	6/1/2020	NF-3 Bill Form / HCFA 1500 Form	2/28/2020	72141	\$ 659.79
1885	0313357530101052	ECLIPSE MEDICAL IMAGING PC	6/1/2020	NF-3 Bill Form / HCFA 1500 Form	2/28/2020	72148	\$ 912.00
1886	0661541900000001	ECLIPSE MEDICAL IMAGING PC	6/1/2020	NF-3 Bill Form / HCFA 1500 Form	3/1/2020	72141	\$ 659.79
1887	0661541900000001	ECLIPSE MEDICAL IMAGING PC	6/1/2020	NF-3 Bill Form / HCFA 1500 Form	3/1/2020	72148	\$ 912.00
1888	0661541900000001	ECLIPSE MEDICAL IMAGING PC	6/1/2020	NF-3 Bill Form / HCFA 1500 Form	2/26/2020	72040	\$ 72.20
1889	0661541900000001	ECLIPSE MEDICAL IMAGING PC	6/1/2020	NF-3 Bill Form / HCFA 1500 Form	2/26/2020	73221	\$ 878.67
1890	0661541900000001	ECLIPSE MEDICAL IMAGING PC	6/1/2020	NF-3 Bill Form / HCFA 1500 Form	2/26/2020	72100	\$ 65.86

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Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
1891	0313357530101052	ECLIPSE MEDICAL IMAGING PC	6/1/2020	NF-3 Bill Form / HCFA 1500 Form	3/1/2020	72146	\$ 959.61
1892	0511425390101014	ECLIPSE MEDICAL IMAGING PC	6/1/2020	NF-3 Bill Form / HCFA 1500 Form	3/1/2020	72148	\$ 912.00
1893	0511425390101014	ECLIPSE MEDICAL IMAGING PC	6/1/2020	NF-3 Bill Form / HCFA 1500 Form	3/1/2020	73221	\$ 659.00
1894	0503733750000001	ECLIPSE MEDICAL IMAGING PC	6/1/2020	NF-3 Bill Form / HCFA 1500 Form	3/1/2020	73721	\$ 659.00
1895	0503733750000001	ECLIPSE MEDICAL IMAGING PC	6/1/2020	NF-3 Bill Form / HCFA 1500 Form	3/1/2020	72141	\$ 879.73
1896	0615652990000001	ECLIPSE MEDICAL IMAGING PC	6/1/2020	NF-3 Bill Form / HCFA 1500 Form	2/25/2020	72100	\$ 87.81
1897	0503733750000001	ECLIPSE MEDICAL IMAGING PC	6/2/2020	NF-3 Bill Form / HCFA 1500 Form	3/3/2020	72148	\$ 912.00
1898	0468626370101072	ECLIPSE MEDICAL IMAGING PC	6/3/2020	NF-3 Bill Form / HCFA 1500 Form	3/2/2020	72141	\$ 879.73
1899	0468626370101072	ECLIPSE MEDICAL IMAGING PC	6/3/2020	NF-3 Bill Form / HCFA 1500 Form	3/2/2020	73030	\$ 71.02
1900	0468626370101072	ECLIPSE MEDICAL IMAGING PC	6/3/2020	NF-3 Bill Form / HCFA 1500 Form	3/2/2020	73030	\$ 71.02
1901	0182406220101315	ECLIPSE MEDICAL IMAGING PC	6/8/2020	NF-3 Bill Form / HCFA 1500 Form	3/8/2020	72141	\$ 879.73
1902	0439777600101131	ECLIPSE MEDICAL IMAGING PC	6/8/2020	NF-3 Bill Form / HCFA 1500 Form	3/5/2020	72141	\$ 659.99
1903	0439777600101131	ECLIPSE MEDICAL IMAGING PC	6/8/2020	NF-3 Bill Form / HCFA 1500 Form	3/5/2020	72148	\$ 912.00
1904	0580578190101018	ECLIPSE MEDICAL IMAGING PC	6/8/2020	NF-3 Bill Form / HCFA 1500 Form	3/8/2020	72070	\$ 69.82
1905	0580578190101018	ECLIPSE MEDICAL IMAGING PC	6/8/2020	NF-3 Bill Form / HCFA 1500 Form	3/8/2020	73510	\$ 62.68
1906	0580578190101018	ECLIPSE MEDICAL IMAGING PC	6/8/2020	NF-3 Bill Form / HCFA 1500 Form	3/8/2020	73221	\$ 878.67
1907	0468626370101072	ECLIPSE MEDICAL IMAGING PC	6/8/2020	NF-3 Bill Form / HCFA 1500 Form	3/8/2020	72146	\$ 959.61
1908	0439777600101131	ECLIPSE MEDICAL IMAGING PC	6/8/2020	NF-3 Bill Form / HCFA 1500 Form	3/9/2020	72146	\$ 959.61
1909	0673723890000001	ECLIPSE MEDICAL IMAGING PC	6/8/2020	NF-3 Bill Form / HCFA 1500 Form	2/25/2020	72141	\$ 879.73
1910	0529028990101044	ECLIPSE MEDICAL IMAGING PC	6/8/2020	NF-3 Bill Form / HCFA 1500 Form	3/5/2020	73030	\$ 71.02
1911	0529028990101044	ECLIPSE MEDICAL IMAGING PC	6/8/2020	NF-3 Bill Form / HCFA 1500 Form	3/5/2020	72100	\$ 65.86
1912	0529028990101044	ECLIPSE MEDICAL IMAGING PC	6/8/2020	NF-3 Bill Form / HCFA 1500 Form	3/5/2020	72040	\$ 96.27
1913	0529028990101044	ECLIPSE MEDICAL IMAGING PC	6/8/2020	NF-3 Bill Form / HCFA 1500 Form	3/5/2020	73560	\$ 55.54
1914	0488966730101023	ECLIPSE MEDICAL IMAGING PC	6/8/2020	NF-3 Bill Form / HCFA 1500 Form	3/5/2020	72148	\$ 912.00
1915	0488966730101023	ECLIPSE MEDICAL IMAGING PC	6/8/2020	NF-3 Bill Form / HCFA 1500 Form	3/5/2020	72141	\$ 659.79
1916	0676164890000001	ECLIPSE MEDICAL IMAGING PC	6/8/2020	NF-3 Bill Form / HCFA 1500 Form	3/6/2020	73721	\$ 878.67
1917	0676164890000001	ECLIPSE MEDICAL IMAGING PC	6/8/2020	NF-3 Bill Form / HCFA 1500 Form	3/6/2020	73221	\$ 659.00
1918	0597299930101025	ECLIPSE MEDICAL IMAGING PC	6/8/2020	NF-3 Bill Form / HCFA 1500 Form	3/9/2020	72100	\$ 65.86
1919	0597299930101025	ECLIPSE MEDICAL IMAGING PC	6/8/2020	NF-3 Bill Form / HCFA 1500 Form	3/9/2020	73110	\$ 52.77
1920	0597299930101025	ECLIPSE MEDICAL IMAGING PC	6/8/2020	NF-3 Bill Form / HCFA 1500 Form	3/9/2020	72070	\$ 69.82
1921	0597299930101025	ECLIPSE MEDICAL IMAGING PC	6/8/2020	NF-3 Bill Form / HCFA 1500 Form	3/9/2020	73030	\$ 71.02
1922	0597299930101025	ECLIPSE MEDICAL IMAGING PC	6/8/2020	NF-3 Bill Form / HCFA 1500 Form	3/9/2020	73510	\$ 62.68
1923	0597299930101025	ECLIPSE MEDICAL IMAGING PC	6/8/2020	NF-3 Bill Form / HCFA 1500 Form	3/9/2020	73510	\$ 62.68
1924	0597299930101025	ECLIPSE MEDICAL IMAGING PC	6/8/2020	NF-3 Bill Form / HCFA 1500 Form	3/9/2020	72040	\$ 96.27
1925	0459096030101021	ECLIPSE MEDICAL IMAGING PC	6/12/2020	NF-3 Bill Form / HCFA 1500 Form	3/11/2020	73221	\$ 878.67
1926	0511425390101014	ECLIPSE MEDICAL IMAGING PC	6/12/2020	NF-3 Bill Form / HCFA 1500 Form	3/12/2020	73721	\$ 659.00
1927	0511425390101014	ECLIPSE MEDICAL IMAGING PC	6/12/2020	NF-3 Bill Form / HCFA 1500 Form	3/12/2020	72146	\$ 959.61
1928	0278866820000001	ECLIPSE MEDICAL IMAGING PC	6/12/2020	NF-3 Bill Form / HCFA 1500 Form	3/11/2020	73721	\$ 878.67
1929	0278866820000001	ECLIPSE MEDICAL IMAGING PC	6/12/2020	NF-3 Bill Form / HCFA 1500 Form	3/11/2020	71100	\$ 66.65
1930	0676164890000001	ECLIPSE MEDICAL IMAGING PC	6/12/2020	NF-3 Bill Form / HCFA 1500 Form	3/10/2020	70551	\$ 874.44
1931	0107126820101059	ECLIPSE MEDICAL IMAGING PC	6/12/2020	NF-3 Bill Form / HCFA 1500 Form	3/10/2020	73718	\$ 901.42
1932	0107126820101059	ECLIPSE MEDICAL IMAGING PC	6/12/2020	NF-3 Bill Form / HCFA 1500 Form	3/10/2020	73221	\$ 659.00
1933	0581181770101117	ECLIPSE MEDICAL IMAGING PC	6/12/2020	NF-3 Bill Form / HCFA 1500 Form	3/13/2020	73221	\$ 878.67
1934	0581181770101117	ECLIPSE MEDICAL IMAGING PC	6/12/2020	NF-3 Bill Form / HCFA 1500 Form	3/13/2020	73721	\$ 659.00
1935	0599367450000001	ECLIPSE MEDICAL IMAGING PC	6/15/2020	NF-3 Bill Form / HCFA 1500 Form	3/12/2020	73221	\$ 878.67
1936	0599824190000001	ECLIPSE MEDICAL IMAGING PC	6/15/2020	NF-3 Bill Form / HCFA 1500 Form	3/19/2020	73721	\$ 659.00
1937	0599824190000001	ECLIPSE MEDICAL IMAGING PC	6/15/2020	NF-3 Bill Form / HCFA 1500 Form	3/19/2020	73221	\$ 878.67
1938	0578558160000001	ECLIPSE MEDICAL IMAGING PC	6/15/2020	NF-3 Bill Form / HCFA 1500 Form	3/20/2020	73721	\$ 878.67
1939	0597299930101025	ECLIPSE MEDICAL IMAGING PC	6/15/2020	NF-3 Bill Form / HCFA 1500 Form	3/18/2020	73221	\$ 878.67
1940	0674402640000003	ECLIPSE MEDICAL IMAGING PC	6/15/2020	NF-3 Bill Form / HCFA 1500 Form	3/18/2020	71100	\$ 88.87
1941	0449305470101017	ECLIPSE MEDICAL IMAGING PC	6/15/2020	NF-3 Bill Form / HCFA 1500 Form	3/19/2020	71046	\$ 78.29
1942	0539766130101014	ECLIPSE MEDICAL IMAGING PC	6/15/2020	NF-3 Bill Form / HCFA 1500 Form	3/12/2020	73221	\$ 878.67
1943	0559824210000002	ECLIPSE MEDICAL IMAGING PC	6/15/2020	NF-3 Bill Form / HCFA 1500 Form	3/18/2020	73700	\$ 365.01
1944	0559824210000002	ECLIPSE MEDICAL IMAGING PC	6/15/2020	NF-3 Bill Form / HCFA 1500 Form	3/18/2020	72131	\$ 581.90
1945	0494456580101044	ECLIPSE MEDICAL IMAGING PC	6/15/2020	NF-3 Bill Form / HCFA 1500 Form	3/17/2020	73718	\$ 901.42
1946	0494456580101044	ECLIPSE MEDICAL IMAGING PC	6/15/2020	NF-3 Bill Form / HCFA 1500 Form	3/17/2020	73721	\$ 659.00
1947	0284688410101158	ECLIPSE MEDICAL IMAGING PC	6/15/2020	NF-3 Bill Form / HCFA 1500 Form	3/20/2020	72148	\$ 912.00
1948	0284688410101158	ECLIPSE MEDICAL IMAGING PC	6/15/2020	NF-3 Bill Form / HCFA 1500 Form	3/20/2020	72141	\$ 659.79
1949	0678301760000001	ECLIPSE MEDICAL IMAGING PC	6/15/2020	NF-3 Bill Form / HCFA 1500 Form	3/18/2020	72100	\$ 65.86
1950	0678301760000001	ECLIPSE MEDICAL IMAGING PC	6/15/2020	NF-3 Bill Form / HCFA 1500 Form	3/18/2020	72040	\$ 72.20
1951	0678301760000001	ECLIPSE MEDICAL IMAGING PC	6/15/2020	NF-3 Bill Form / HCFA 1500 Form	3/18/2020	73221	\$ 878.67
1952	0213302110101091	ECLIPSE MEDICAL IMAGING PC	6/15/2020	NF-3 Bill Form / HCFA 1500 Form	3/15/2020	73721	\$ 878.67
1953	0655228320105014	ECLIPSE MEDICAL IMAGING PC	6/15/2020	NF-3 Bill Form / HCFA 1500 Form	3/12/2020	72148	\$ 912.00
1954	0655228320105014	ECLIPSE MEDICAL IMAGING PC	6/15/2020	NF-3 Bill Form / HCFA 1500 Form	3/12/2020	72141	\$ 659.79
1955	0581181770101117	ECLIPSE MEDICAL IMAGING PC	6/15/2020	NF-3 Bill Form / HCFA 1500 Form	3/16/2020	72141	\$ 879.73
1956	0678301760000001	ECLIPSE MEDICAL IMAGING PC	6/15/2020	NF-3 Bill Form / HCFA 1500 Form	3/20/2020	73221	\$ 878.67
1957	0284688410101158	ECLIPSE MEDICAL IMAGING PC	6/15/2020	NF-3 Bill Form / HCFA 1500 Form	3/16/2020	70551	\$ 655.83
1958	0284688410101158	ECLIPSE MEDICAL IMAGING PC	6/15/2020	NF-3 Bill Form / HCFA 1500 Form	3/16/2020	73221	\$ 878.67
1959	0107126820101059	ECLIPSE MEDICAL IMAGING PC	6/15/2020	NF-3 Bill Form / HCFA 1500 Form	3/16/2020	73721	\$ 878.67
1960	0107126820101059	ECLIPSE MEDICAL IMAGING PC	6/15/2020	NF-3 Bill Form / HCFA 1500 Form	3/16/2020	71250	\$ 388.81

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Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
1961	0676164890000001	ECLIPSE MEDICAL IMAGING PC	6/17/2020	NF-3 Bill Form / HCFA 1500 Form	3/16/2020	73721	\$ 878.67
1962	0676164890000001	ECLIPSE MEDICAL IMAGING PC	6/17/2020	NF-3 Bill Form / HCFA 1500 Form	3/16/2020	73221	\$ 659.00
1963	0599058640000001	ECLIPSE MEDICAL IMAGING PC	6/22/2020	NF-3 Bill Form / HCFA 1500 Form	5/6/2020	73221	\$ 878.67
1964	0555112600101029	ECLIPSE MEDICAL IMAGING PC	6/22/2020	NF-3 Bill Form / HCFA 1500 Form	5/6/2020	73221	\$ 878.67
1965	0278866820000001	ECLIPSE MEDICAL IMAGING PC	6/23/2020	NF-3 Bill Form / HCFA 1500 Form	5/8/2020	72148	\$ 912.00
1966	0278866820000001	ECLIPSE MEDICAL IMAGING PC	6/23/2020	NF-3 Bill Form / HCFA 1500 Form	5/8/2020	72141	\$ 659.79
1967	0674402640000003	ECLIPSE MEDICAL IMAGING PC	6/23/2020	NF-3 Bill Form / HCFA 1500 Form	5/8/2020	73721	\$ 659.00
1968	0674402640000003	ECLIPSE MEDICAL IMAGING PC	6/23/2020	NF-3 Bill Form / HCFA 1500 Form	5/8/2020	73221	\$ 878.67
1969	0599058640000001	ECLIPSE MEDICAL IMAGING PC	6/23/2020	NF-3 Bill Form / HCFA 1500 Form	5/11/2020	73721	\$ 878.67
1970	0274324000101018	ECLIPSE MEDICAL IMAGING PC	6/23/2020	NF-3 Bill Form / HCFA 1500 Form	5/11/2020	72148	\$ 912.00
1971	0274324000101018	ECLIPSE MEDICAL IMAGING PC	6/23/2020	NF-3 Bill Form / HCFA 1500 Form	5/11/2020	73221	\$ 659.00
1972	0674402640000003	ECLIPSE MEDICAL IMAGING PC	6/26/2020	NF-3 Bill Form / HCFA 1500 Form	5/12/2020	73721	\$ 878.67
1973	0671800930000001	ECLIPSE MEDICAL IMAGING PC	6/26/2020	NF-3 Bill Form / HCFA 1500 Form	5/14/2020	73221	\$ 659.00
1974	0671800930000001	ECLIPSE MEDICAL IMAGING PC	6/26/2020	NF-3 Bill Form / HCFA 1500 Form	5/14/2020	72148	\$ 912.00
1975	0674402640000003	ECLIPSE MEDICAL IMAGING PC	6/26/2020	NF-3 Bill Form / HCFA 1500 Form	5/12/2020	73221	\$ 878.67
1976	0128851090101225	ECLIPSE MEDICAL IMAGING PC	6/26/2020	NF-3 Bill Form / HCFA 1500 Form	5/14/2020	72141	\$ 659.79
1977	0128851090101225	ECLIPSE MEDICAL IMAGING PC	6/26/2020	NF-3 Bill Form / HCFA 1500 Form	5/14/2020	72148	\$ 912.00
1978	0673873040000003	ECLIPSE MEDICAL IMAGING PC	6/26/2020	NF-3 Bill Form / HCFA 1500 Form	5/13/2020	73550	\$ 80.93
1979	0628198190000002	ECLIPSE MEDICAL IMAGING PC	6/26/2020	NF-3 Bill Form / HCFA 1500 Form	5/13/2020	73221	\$ 659.00
1980	0628198190000002	ECLIPSE MEDICAL IMAGING PC	6/26/2020	NF-3 Bill Form / HCFA 1500 Form	5/13/2020	73721	\$ 878.67
1981	0274324000101018	ECLIPSE MEDICAL IMAGING PC	6/26/2020	NF-3 Bill Form / HCFA 1500 Form	5/14/2020	73221	\$ 878.67
1982	0671800930000001	ECLIPSE MEDICAL IMAGING PC	6/26/2020	NF-3 Bill Form / HCFA 1500 Form	5/12/2020	73221	\$ 878.67
1983	0674402640000003	ECLIPSE MEDICAL IMAGING PC	6/26/2020	NF-3 Bill Form / HCFA 1500 Form	5/13/2020	73721	\$ 659.00
1984	0674402640000003	ECLIPSE MEDICAL IMAGING PC	6/26/2020	NF-3 Bill Form / HCFA 1500 Form	5/13/2020	72141	\$ 879.73
1985	0459751810101068	ECLIPSE MEDICAL IMAGING PC	6/29/2020	NF-3 Bill Form / HCFA 1500 Form	5/15/2020	72146	\$ 959.61
1986	0676164890000001	ECLIPSE MEDICAL IMAGING PC	6/29/2020	NF-3 Bill Form / HCFA 1500 Form	5/15/2020	73221	\$ 878.67
1987	0557225250101030	ECLIPSE MEDICAL IMAGING PC	6/29/2020	NF-3 Bill Form / HCFA 1500 Form	5/15/2020	73721	\$ 878.67
1988	0581028210000002	ECLIPSE MEDICAL IMAGING PC	6/29/2020	NF-3 Bill Form / HCFA 1500 Form	5/15/2020	72148	\$ 912.00
1989	0581028210000002	ECLIPSE MEDICAL IMAGING PC	6/29/2020	NF-3 Bill Form / HCFA 1500 Form	5/15/2020	72141	\$ 659.79
1990	0676164890000001	ECLIPSE MEDICAL IMAGING PC	6/29/2020	NF-3 Bill Form / HCFA 1500 Form	5/15/2020	72141	\$ 879.73
1991	0274324000101018	ECLIPSE MEDICAL IMAGING PC	7/2/2020	NF-3 Bill Form / HCFA 1500 Form	5/18/2020	72141	\$ 879.73
1992	0671800930000001	ECLIPSE MEDICAL IMAGING PC	7/2/2020	NF-3 Bill Form / HCFA 1500 Form	5/18/2020	72141	\$ 879.73
1993	0674402640000003	ECLIPSE MEDICAL IMAGING PC	7/2/2020	NF-3 Bill Form / HCFA 1500 Form	5/18/2020	72148	\$ 912.00
1994	0581028210000002	ECLIPSE MEDICAL IMAGING PC	7/6/2020	NF-3 Bill Form / HCFA 1500 Form	5/20/2020	72141	\$ 659.79
1995	0581028210000002	ECLIPSE MEDICAL IMAGING PC	7/6/2020	NF-3 Bill Form / HCFA 1500 Form	5/20/2020	72148	\$ 912.00
1996	0494456580101044	ECLIPSE MEDICAL IMAGING PC	7/6/2020	NF-3 Bill Form / HCFA 1500 Form	5/20/2020	72148	\$ 912.00
1997	0494456580101044	ECLIPSE MEDICAL IMAGING PC	7/6/2020	NF-3 Bill Form / HCFA 1500 Form	5/20/2020	70551	\$ 655.83
1998	0674402640000003	ECLIPSE MEDICAL IMAGING PC	7/6/2020	NF-3 Bill Form / HCFA 1500 Form	5/19/2020	73221	\$ 878.67
1999	0628198190000002	ECLIPSE MEDICAL IMAGING PC	7/6/2020	NF-3 Bill Form / HCFA 1500 Form	5/21/2020	73721	\$ 878.67
2000	0674402640000003	ECLIPSE MEDICAL IMAGING PC	7/6/2020	NF-3 Bill Form / HCFA 1500 Form	5/19/2020	73221	\$ 878.67
2001	0425958070101107	ECLIPSE MEDICAL IMAGING PC	7/6/2020	NF-3 Bill Form / HCFA 1500 Form	5/25/2020	73721	\$ 878.67
2002	0674402640000003	ECLIPSE MEDICAL IMAGING PC	7/6/2020	NF-3 Bill Form / HCFA 1500 Form	5/22/2020	73721	\$ 878.67
2003	0674402640000003	ECLIPSE MEDICAL IMAGING PC	7/6/2020	NF-3 Bill Form / HCFA 1500 Form	5/22/2020	73221	\$ 659.00
2004	0676164890000001	ECLIPSE MEDICAL IMAGING PC	7/6/2020	NF-3 Bill Form / HCFA 1500 Form	5/22/2020	72148	\$ 912.00
2005	0676164890000001	ECLIPSE MEDICAL IMAGING PC	7/6/2020	NF-3 Bill Form / HCFA 1500 Form	6/22/2020	72148	\$ 912.00
2006	0527624530101151	ECLIPSE MEDICAL IMAGING PC	7/6/2020	NF-3 Bill Form / HCFA 1500 Form	5/25/2020	73030	\$ 71.02
2007	0527624530101151	ECLIPSE MEDICAL IMAGING PC	7/6/2020	NF-3 Bill Form / HCFA 1500 Form	5/25/2020	72100	\$ 65.86
2008	0527624530101151	ECLIPSE MEDICAL IMAGING PC	7/6/2020	NF-3 Bill Form / HCFA 1500 Form	5/25/2020	73030	\$ 71.02
2009	0527624530101151	ECLIPSE MEDICAL IMAGING PC	7/6/2020	NF-3 Bill Form / HCFA 1500 Form	5/25/2020	72040	\$ 72.20
2010	0527624530101151	ECLIPSE MEDICAL IMAGING PC	7/6/2020	NF-3 Bill Form / HCFA 1500 Form	5/25/2020	73560	\$ 55.54
2011	0527624530101151	ECLIPSE MEDICAL IMAGING PC	7/6/2020	NF-3 Bill Form / HCFA 1500 Form	5/25/2020	73221	\$ 878.67
2012	0527624530101151	ECLIPSE MEDICAL IMAGING PC	7/6/2020	NF-3 Bill Form / HCFA 1500 Form	5/25/2020	73560	\$ 55.54
2013	0527624530101151	ECLIPSE MEDICAL IMAGING PC	7/6/2020	NF-3 Bill Form / HCFA 1500 Form	5/25/2020	73030	\$ 71.02
2014	0527624530101151	ECLIPSE MEDICAL IMAGING PC	7/6/2020	NF-3 Bill Form / HCFA 1500 Form	5/25/2020	73221	\$ 878.67
2015	0527624530101151	ECLIPSE MEDICAL IMAGING PC	7/6/2020	NF-3 Bill Form / HCFA 1500 Form	5/25/2020	72100	\$ 65.86
2016	0527624530101151	ECLIPSE MEDICAL IMAGING PC	7/6/2020	NF-3 Bill Form / HCFA 1500 Form	5/25/2020	73030	\$ 71.02
2017	0527624530101151	ECLIPSE MEDICAL IMAGING PC	7/6/2020	NF-3 Bill Form / HCFA 1500 Form	5/25/2020	72070	\$ 69.82
2018	0527624530101151	ECLIPSE MEDICAL IMAGING PC	7/6/2020	NF-3 Bill Form / HCFA 1500 Form	5/25/2020	72040	\$ 72.20
2019	0367505490000001	ECLIPSE MEDICAL IMAGING PC	7/6/2020	NF-3 Bill Form / HCFA 1500 Form	5/22/2020	73610	\$ 58.72
2020	0367505490000001	ECLIPSE MEDICAL IMAGING PC	7/6/2020	NF-3 Bill Form / HCFA 1500 Form	5/22/2020	73610	\$ 58.72
2021	0367505490000001	ECLIPSE MEDICAL IMAGING PC	7/6/2020	NF-3 Bill Form / HCFA 1500 Form	5/22/2020	72040	\$ 72.20
2022	0367505490000001	ECLIPSE MEDICAL IMAGING PC	7/6/2020	NF-3 Bill Form / HCFA 1500 Form	5/22/2020	72100	\$ 65.86
2023	0367505490000001	ECLIPSE MEDICAL IMAGING PC	7/6/2020	NF-3 Bill Form / HCFA 1500 Form	5/22/2020	73721	\$ 878.67
2024	0367505490000001	ECLIPSE MEDICAL IMAGING PC	7/6/2020	NF-3 Bill Form / HCFA 1500 Form	5/22/2020	72070	\$ 69.82
2025	0402978550101020	ECLIPSE MEDICAL IMAGING PC	7/13/2020	NF-3 Bill Form / HCFA 1500 Form	5/28/2020	72141	\$ 879.73
2026	0184928420101082	ECLIPSE MEDICAL IMAGING PC	7/13/2020	NF-3 Bill Form / HCFA 1500 Form	5/28/2020	72148	\$ 912.00
2027	0527624530101151	ECLIPSE MEDICAL IMAGING PC	7/13/2020	NF-3 Bill Form / HCFA 1500 Form	5/28/2020	73221	\$ 659.00
2028	0527624530101151	ECLIPSE MEDICAL IMAGING PC	7/13/2020	NF-3 Bill Form / HCFA 1500 Form	5/28/2020	73721	\$ 878.67
2029	0527624530101151	ECLIPSE MEDICAL IMAGING PC	7/13/2020	NF-3 Bill Form / HCFA 1500 Form	5/26/2020	73721	\$ 878.67
2030	0527624530101151	ECLIPSE MEDICAL IMAGING PC	7/13/2020	NF-3 Bill Form / HCFA 1500 Form	5/26/2020	70551	\$ 655.83

Government Employees Insurance Company, et al v. Eclipse Medical Imaging, et al
Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
2031	0555112600101029	ECLIPSE MEDICAL IMAGING PC	7/13/2020	NF-3 Bill Form / HCFA 1500 Form	5/27/2020	72148	\$ 912.00
2032	0555112600101029	ECLIPSE MEDICAL IMAGING PC	7/13/2020	NF-3 Bill Form / HCFA 1500 Form	5/27/2020	72141	\$ 659.79
2033	0402978550101020	ECLIPSE MEDICAL IMAGING PC	7/13/2020	NF-3 Bill Form / HCFA 1500 Form	5/28/2020	72148	\$ 912.00
2034	0674402640000003	ECLIPSE MEDICAL IMAGING PC	7/14/2020	NF-3 Bill Form / HCFA 1500 Form	5/29/2020	73721	\$ 878.67
2035	0674402640000003	ECLIPSE MEDICAL IMAGING PC	7/14/2020	NF-3 Bill Form / HCFA 1500 Form	5/29/2020	73221	\$ 659.00
2036	0642075290101021	ECLIPSE MEDICAL IMAGING PC	7/17/2020	NF-3 Bill Form / HCFA 1500 Form	6/1/2020	70551	\$ 655.83
2037	0642075290101021	ECLIPSE MEDICAL IMAGING PC	7/17/2020	NF-3 Bill Form / HCFA 1500 Form	6/1/2020	73221	\$ 878.67
2038	0666834420000001	ECLIPSE MEDICAL IMAGING PC	7/17/2020	NF-3 Bill Form / HCFA 1500 Form	6/1/2020	73718	\$ 901.42
2039	0666834420000001	ECLIPSE MEDICAL IMAGING PC	7/17/2020	NF-3 Bill Form / HCFA 1500 Form	6/1/2020	73221	\$ 659.00
2040	0527624530101151	ECLIPSE MEDICAL IMAGING PC	7/17/2020	NF-3 Bill Form / HCFA 1500 Form	6/2/2020	73560	\$ 55.54
2041	0527624530101151	ECLIPSE MEDICAL IMAGING PC	7/17/2020	NF-3 Bill Form / HCFA 1500 Form	6/2/2020	73030	\$ 71.02
2042	0527624530101151	ECLIPSE MEDICAL IMAGING PC	7/17/2020	NF-3 Bill Form / HCFA 1500 Form	6/2/2020	72040	\$ 72.20
2043	0527624530101151	ECLIPSE MEDICAL IMAGING PC	7/17/2020	NF-3 Bill Form / HCFA 1500 Form	6/2/2020	72100	\$ 65.86
2044	0527624530101151	ECLIPSE MEDICAL IMAGING PC	7/17/2020	NF-3 Bill Form / HCFA 1500 Form	6/2/2020	73221	\$ 878.67
2045	0599824190000001	ECLIPSE MEDICAL IMAGING PC	7/17/2020	NF-3 Bill Form / HCFA 1500 Form	6/2/2020	72148	\$ 912.00
2046	0599824190000001	ECLIPSE MEDICAL IMAGING PC	7/17/2020	NF-3 Bill Form / HCFA 1500 Form	6/2/2020	72141	\$ 659.79
2047	0422476890101036	ECLIPSE MEDICAL IMAGING PC	7/17/2020	NF-3 Bill Form / HCFA 1500 Form	6/1/2020	72125	\$ 581.90
2048	0591517240101039	ECLIPSE MEDICAL IMAGING PC	7/21/2020	NF-3 Bill Form / HCFA 1500 Form	6/3/2020	72070	\$ 69.82
2049	0591517240101039	ECLIPSE MEDICAL IMAGING PC	7/21/2020	NF-3 Bill Form / HCFA 1500 Form	6/3/2020	72148	\$ 912.00
2050	0591517240101039	ECLIPSE MEDICAL IMAGING PC	7/21/2020	NF-3 Bill Form / HCFA 1500 Form	6/3/2020	72141	\$ 659.79
2051	0448913880101022	ECLIPSE MEDICAL IMAGING PC	7/21/2020	NF-3 Bill Form / HCFA 1500 Form	6/3/2020	72148	\$ 912.00
2052	0448913880101022	ECLIPSE MEDICAL IMAGING PC	7/21/2020	NF-3 Bill Form / HCFA 1500 Form	6/3/2020	73221	\$ 659.00
2053	0642075290101021	ECLIPSE MEDICAL IMAGING PC	7/21/2020	NF-3 Bill Form / HCFA 1500 Form	6/3/2020	72148	\$ 912.00
2054	0642075290101021	ECLIPSE MEDICAL IMAGING PC	7/21/2020	NF-3 Bill Form / HCFA 1500 Form	6/3/2020	72141	\$ 659.79
2055	0106055580101161	ECLIPSE MEDICAL IMAGING PC	7/22/2020	NF-3 Bill Form / HCFA 1500 Form	6/5/2020	72141	\$ 879.73
2056	0642512420000001	ECLIPSE MEDICAL IMAGING PC	7/22/2020	NF-3 Bill Form / HCFA 1500 Form	6/5/2020	72100	\$ 65.86
2057	0642512420000001	ECLIPSE MEDICAL IMAGING PC	7/22/2020	NF-3 Bill Form / HCFA 1500 Form	6/5/2020	73700	\$ 486.68
2058	0642512420000001	ECLIPSE MEDICAL IMAGING PC	7/22/2020	NF-3 Bill Form / HCFA 1500 Form	6/5/2020	72040	\$ 72.20
2059	0539766130101014	ECLIPSE MEDICAL IMAGING PC	7/22/2020	NF-3 Bill Form / HCFA 1500 Form	6/4/2020	72141	\$ 879.73
2060	0674402640000003	ECLIPSE MEDICAL IMAGING PC	7/24/2020	NF-3 Bill Form / HCFA 1500 Form	6/8/2020	72148	\$ 912.00
2061	0527624530101151	ECLIPSE MEDICAL IMAGING PC	7/27/2020	NF-3 Bill Form / HCFA 1500 Form	6/12/2020	72148	\$ 912.00
2062	0527624530101151	ECLIPSE MEDICAL IMAGING PC	7/27/2020	NF-3 Bill Form / HCFA 1500 Form	6/12/2020	72141	\$ 659.79
2063	0580578190101018	ECLIPSE MEDICAL IMAGING PC	7/27/2020	NF-3 Bill Form / HCFA 1500 Form	6/10/2020	72148	\$ 912.00
2064	0580578190101018	ECLIPSE MEDICAL IMAGING PC	7/27/2020	NF-3 Bill Form / HCFA 1500 Form	6/10/2020	72141	\$ 659.79
2065	0448913880101022	ECLIPSE MEDICAL IMAGING PC	7/27/2020	NF-3 Bill Form / HCFA 1500 Form	6/10/2020	73218	\$ 765.99
2066	8668822720000001	ECLIPSE MEDICAL IMAGING PC	7/27/2020	NF-3 Bill Form / HCFA 1500 Form	6/12/2020	73721	\$ 878.67
2067	0674402640000003	ECLIPSE MEDICAL IMAGING PC	7/27/2020	NF-3 Bill Form / HCFA 1500 Form	6/10/2020	72148	\$ 912.00
2068	0674402640000003	ECLIPSE MEDICAL IMAGING PC	7/27/2020	NF-3 Bill Form / HCFA 1500 Form	6/10/2020	72141	\$ 659.79
2069	0673873040000003	ECLIPSE MEDICAL IMAGING PC	7/27/2020	NF-3 Bill Form / HCFA 1500 Form	6/8/2020	72148	\$ 912.00
2070	0422476890101036	ECLIPSE MEDICAL IMAGING PC	7/27/2020	NF-3 Bill Form / HCFA 1500 Form	6/12/2020	72131	\$ 581.90
2071	0642512420000001	ECLIPSE MEDICAL IMAGING PC	7/27/2020	NF-3 Bill Form / HCFA 1500 Form	6/12/2020	73700	\$ 486.68
2072	0649790230000001	ECLIPSE MEDICAL IMAGING PC	7/27/2020	NF-3 Bill Form / HCFA 1500 Form	6/12/2020	73030	\$ 71.02
2073	0649790230000001	ECLIPSE MEDICAL IMAGING PC	7/27/2020	NF-3 Bill Form / HCFA 1500 Form	6/12/2020	72100	\$ 65.86
2074	0649790230000001	ECLIPSE MEDICAL IMAGING PC	7/27/2020	NF-3 Bill Form / HCFA 1500 Form	6/12/2020	72040	\$ 96.27
2075	0649790230000001	ECLIPSE MEDICAL IMAGING PC	7/27/2020	NF-3 Bill Form / HCFA 1500 Form	6/12/2020	73560	\$ 55.54
2076	0649790620101119	ECLIPSE MEDICAL IMAGING PC	7/27/2020	NF-3 Bill Form / HCFA 1500 Form	6/11/2020	73221	\$ 878.67
2077	0649790620101119	ECLIPSE MEDICAL IMAGING PC	7/27/2020	NF-3 Bill Form / HCFA 1500 Form	6/11/2020	70551	\$ 655.83
2078	0425958070101107	ECLIPSE MEDICAL IMAGING PC	7/27/2020	NF-3 Bill Form / HCFA 1500 Form	6/11/2020	73721	\$ 878.67
2079	0669780050000001	ECLIPSE MEDICAL IMAGING PC	7/27/2020	NF-3 Bill Form / HCFA 1500 Form	6/9/2020	70551	\$ 655.83
2080	0669780050000001	ECLIPSE MEDICAL IMAGING PC	7/27/2020	NF-3 Bill Form / HCFA 1500 Form	6/9/2020	73221	\$ 878.67
2081	0303680300101023	ECLIPSE MEDICAL IMAGING PC	7/27/2020	NF-3 Bill Form / HCFA 1500 Form	6/8/2020	72070	\$ 69.82
2082	0303680300101023	ECLIPSE MEDICAL IMAGING PC	7/27/2020	NF-3 Bill Form / HCFA 1500 Form	6/8/2020	73030	\$ 71.02
2083	0303680300101023	ECLIPSE MEDICAL IMAGING PC	7/27/2020	NF-3 Bill Form / HCFA 1500 Form	6/8/2020	71130	\$ 71.02
2084	0303680300101023	ECLIPSE MEDICAL IMAGING PC	7/27/2020	NF-3 Bill Form / HCFA 1500 Form	6/8/2020	72040	\$ 96.27
2085	0303680300101023	ECLIPSE MEDICAL IMAGING PC	7/27/2020	NF-3 Bill Form / HCFA 1500 Form	6/8/2020	72100	\$ 65.86
2086	0527624530101151	ECLIPSE MEDICAL IMAGING PC	7/28/2020	NF-3 Bill Form / HCFA 1500 Form	6/15/2020	72141	\$ 659.79
2087	0527624530101151	ECLIPSE MEDICAL IMAGING PC	7/28/2020	NF-3 Bill Form / HCFA 1500 Form	6/15/2020	72148	\$ 912.00
2088	0476595960101041	ECLIPSE MEDICAL IMAGING PC	7/28/2020	NF-3 Bill Form / HCFA 1500 Form	6/8/2020	72148	\$ 912.00
2089	0476595960101041	ECLIPSE MEDICAL IMAGING PC	7/28/2020	NF-3 Bill Form / HCFA 1500 Form	6/8/2020	72141	\$ 659.79
2090	0459751810101068	ECLIPSE MEDICAL IMAGING PC	7/28/2020	NF-3 Bill Form / HCFA 1500 Form	6/15/2020	72141	\$ 879.73
2091	0230885650101022	ECLIPSE MEDICAL IMAGING PC	7/29/2020	NF-3 Bill Form / HCFA 1500 Form	6/11/2020	73721	\$ 878.67
2092	0230885650101022	ECLIPSE MEDICAL IMAGING PC	7/29/2020	NF-3 Bill Form / HCFA 1500 Form	6/11/2020	73221	\$ 659.00
2093	0674402640000003	ECLIPSE MEDICAL IMAGING PC	7/31/2020	NF-3 Bill Form / HCFA 1500 Form	6/15/2020	72148	\$ 912.00
2094	0547770510000001	ECLIPSE MEDICAL IMAGING PC	7/31/2020	NF-3 Bill Form / HCFA 1500 Form	6/16/2020	73221	\$ 878.67
2095	0230885650101022	ECLIPSE MEDICAL IMAGING PC	7/31/2020	NF-3 Bill Form / HCFA 1500 Form	6/16/2020	73221	\$ 878.67
2096	0649790620101119	ECLIPSE MEDICAL IMAGING PC	8/3/2020	NF-3 Bill Form / HCFA 1500 Form	6/18/2020	73721	\$ 659.00
2097	0649790620101119	ECLIPSE MEDICAL IMAGING PC	8/3/2020	NF-3 Bill Form / HCFA 1500 Form	6/18/2020	72141	\$ 879.73
2098	0106055580101161	ECLIPSE MEDICAL IMAGING PC	8/3/2020	NF-3 Bill Form / HCFA 1500 Form	6/17/2020	73221	\$ 659.00
2099	0106055580101161	ECLIPSE MEDICAL IMAGING PC	8/3/2020	NF-3 Bill Form / HCFA 1500 Form	6/17/2020	72148	\$ 912.00
2100	0642512420000001	ECLIPSE MEDICAL IMAGING PC	8/3/2020	NF-3 Bill Form / HCFA 1500 Form	6/19/2020	72125	\$ 581.90

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Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
2101	0642512420000001	ECLIPSE MEDICAL IMAGING PC	8/3/2020	NF-3 Bill Form / HCFA 1500 Form	6/19/2020	73700	\$ 365.01
2102	0642512420000001	ECLIPSE MEDICAL IMAGING PC	8/3/2020	NF-3 Bill Form / HCFA 1500 Form	6/19/2020	73510	\$ 62.68
2103	0674402640000003	ECLIPSE MEDICAL IMAGING PC	8/3/2020	NF-3 Bill Form / HCFA 1500 Form	6/19/2020	73721	\$ 878.67
2104	0422598040101101	ECLIPSE MEDICAL IMAGING PC	8/3/2020	NF-3 Bill Form / HCFA 1500 Form	6/17/2020	73721	\$ 878.67
2105	0494456580101044	ECLIPSE MEDICAL IMAGING PC	8/3/2020	NF-3 Bill Form / HCFA 1500 Form	6/17/2020	72141	\$ 879.73
2106	0674402640000003	ECLIPSE MEDICAL IMAGING PC	8/3/2020	NF-3 Bill Form / HCFA 1500 Form	6/17/2020	72141	\$ 879.73
2107	0674402640000003	ECLIPSE MEDICAL IMAGING PC	8/3/2020	NF-3 Bill Form / HCFA 1500 Form	6/17/2020	73721	\$ 659.00
2108	0230885650101022	ECLIPSE MEDICAL IMAGING PC	8/3/2020	NF-3 Bill Form / HCFA 1500 Form	6/22/2020	72141	\$ 659.79
2109	0230885650101022	ECLIPSE MEDICAL IMAGING PC	8/3/2020	NF-3 Bill Form / HCFA 1500 Form	6/22/2020	72148	\$ 912.00
2110	0668197860000001	ECLIPSE MEDICAL IMAGING PC	8/3/2020	NF-3 Bill Form / HCFA 1500 Form	6/22/2020	73221	\$ 878.67
2111	0642512420000001	ECLIPSE MEDICAL IMAGING PC	8/3/2020	NF-3 Bill Form / HCFA 1500 Form	6/22/2020	72131	\$ 581.90
2112	0661269150000001	ECLIPSE MEDICAL IMAGING PC	8/3/2020	NF-3 Bill Form / HCFA 1500 Form	6/19/2020	70551	\$ 655.83
2113	0661269150000001	ECLIPSE MEDICAL IMAGING PC	8/3/2020	NF-3 Bill Form / HCFA 1500 Form	6/19/2020	73721	\$ 879.73
2114	0547770510000001	ECLIPSE MEDICAL IMAGING PC	8/3/2020	NF-3 Bill Form / HCFA 1500 Form	6/22/2020	72148	\$ 912.00
2115	0547770510000001	ECLIPSE MEDICAL IMAGING PC	8/3/2020	NF-3 Bill Form / HCFA 1500 Form	6/22/2020	72141	\$ 659.79
2116	0635285070101029	ECLIPSE MEDICAL IMAGING PC	8/3/2020	NF-3 Bill Form / HCFA 1500 Form	6/18/2020	73721	\$ 878.67
2117	0322087600101123	ECLIPSE MEDICAL IMAGING PC	8/3/2020	NF-3 Bill Form / HCFA 1500 Form	6/18/2020	72148	\$ 912.00
2118	0322087600101123	ECLIPSE MEDICAL IMAGING PC	8/3/2020	NF-3 Bill Form / HCFA 1500 Form	6/18/2020	73221	\$ 659.00
2119	0246161970101023	ECLIPSE MEDICAL IMAGING PC	8/3/2020	NF-3 Bill Form / HCFA 1500 Form	6/18/2020	73721	\$ 878.67
2120	0645706700000001	ECLIPSE MEDICAL IMAGING PC	8/7/2020	NF-3 Bill Form / HCFA 1500 Form	6/23/2020	73721	\$ 878.67
2121	0645706700000001	ECLIPSE MEDICAL IMAGING PC	8/7/2020	NF-3 Bill Form / HCFA 1500 Form	6/23/2020	73721	\$ 439.33
2122	0636118500101030	ECLIPSE MEDICAL IMAGING PC	8/7/2020	NF-3 Bill Form / HCFA 1500 Form	6/23/2020	73221	\$ 659.00
2123	0636118500101030	ECLIPSE MEDICAL IMAGING PC	8/7/2020	NF-3 Bill Form / HCFA 1500 Form	6/23/2020	73721	\$ 878.67
2124	0649790620101119	ECLIPSE MEDICAL IMAGING PC	8/7/2020	NF-3 Bill Form / HCFA 1500 Form	6/23/2020	70551	\$ 655.83
2125	0649790620101119	ECLIPSE MEDICAL IMAGING PC	8/7/2020	NF-3 Bill Form / HCFA 1500 Form	6/23/2020	73721	\$ 878.67
2126	0336847750101118	ECLIPSE MEDICAL IMAGING PC	8/7/2020	NF-3 Bill Form / HCFA 1500 Form	6/23/2020	73221	\$ 878.67
2127	0422598040101101	ECLIPSE MEDICAL IMAGING PC	8/10/2020	NF-3 Bill Form / HCFA 1500 Form	6/24/2020	71100	\$ 66.65
2128	0422598040101101	ECLIPSE MEDICAL IMAGING PC	8/10/2020	NF-3 Bill Form / HCFA 1500 Form	6/24/2020	73721	\$ 659.00
2129	0422598040101101	ECLIPSE MEDICAL IMAGING PC	8/10/2020	NF-3 Bill Form / HCFA 1500 Form	6/24/2020	73718	\$ 901.42
2130	0176082250101083	ECLIPSE MEDICAL IMAGING PC	8/10/2020	NF-3 Bill Form / HCFA 1500 Form	6/24/2020	73718	\$ 901.42
2131	0176082250101083	ECLIPSE MEDICAL IMAGING PC	8/10/2020	NF-3 Bill Form / HCFA 1500 Form	6/24/2020	73221	\$ 659.00
2132	0456533710000002	ECLIPSE MEDICAL IMAGING PC	8/10/2020	NF-3 Bill Form / HCFA 1500 Form	6/26/2020	73721	\$ 878.67
2133	0456533710000002	ECLIPSE MEDICAL IMAGING PC	8/10/2020	NF-3 Bill Form / HCFA 1500 Form	6/26/2020	72100	\$ 65.86
2134	0456533710000002	ECLIPSE MEDICAL IMAGING PC	8/10/2020	NF-3 Bill Form / HCFA 1500 Form	6/26/2020	72040	\$ 72.20
2135	0645706700000001	ECLIPSE MEDICAL IMAGING PC	8/10/2020	NF-3 Bill Form / HCFA 1500 Form	6/26/2020	73721	\$ 659.00
2136	0645706700000001	ECLIPSE MEDICAL IMAGING PC	8/10/2020	NF-3 Bill Form / HCFA 1500 Form	6/26/2020	73718	\$ 901.42
2137	0422598040101101	ECLIPSE MEDICAL IMAGING PC	8/10/2020	NF-3 Bill Form / HCFA 1500 Form	6/26/2020	72141	\$ 879.73
2138	0661269150000001	ECLIPSE MEDICAL IMAGING PC	8/10/2020	NF-3 Bill Form / HCFA 1500 Form	6/26/2020	73721	\$ 878.67
2139	0661269150000001	ECLIPSE MEDICAL IMAGING PC	8/10/2020	NF-3 Bill Form / HCFA 1500 Form	6/26/2020	73221	\$ 659.00
2140	0667991480000001	ECLIPSE MEDICAL IMAGING PC	8/10/2020	NF-3 Bill Form / HCFA 1500 Form	6/25/2020	73221	\$ 878.67
2141	0599058640000001	ECLIPSE MEDICAL IMAGING PC	8/10/2020	NF-3 Bill Form / HCFA 1500 Form	6/25/2020	72141	\$ 659.79
2142	0599058640000001	ECLIPSE MEDICAL IMAGING PC	8/10/2020	NF-3 Bill Form / HCFA 1500 Form	6/25/2020	72148	\$ 912.00
2143	0645706700000001	ECLIPSE MEDICAL IMAGING PC	8/10/2020	NF-3 Bill Form / HCFA 1500 Form	6/25/2020	70551	\$ 655.83
2144	0645706700000001	ECLIPSE MEDICAL IMAGING PC	8/10/2020	NF-3 Bill Form / HCFA 1500 Form	6/25/2020	73221	\$ 878.67
2145	0322087600101123	ECLIPSE MEDICAL IMAGING PC	8/10/2020	NF-3 Bill Form / HCFA 1500 Form	6/25/2020	72141	\$ 879.73
2146	0649790620101119	ECLIPSE MEDICAL IMAGING PC	8/10/2020	NF-3 Bill Form / HCFA 1500 Form	6/25/2020	72148	\$ 912.00
2147	0667991480000001	ECLIPSE MEDICAL IMAGING PC	8/10/2020	NF-3 Bill Form / HCFA 1500 Form	6/25/2020	73721	\$ 878.67
2148	8668822720000001	ECLIPSE MEDICAL IMAGING PC	8/14/2020	NF-3 Bill Form / HCFA 1500 Form	6/29/2020	72148	\$ 912.00
2149	8668822720000001	ECLIPSE MEDICAL IMAGING PC	8/14/2020	NF-3 Bill Form / HCFA 1500 Form	6/29/2020	73221	\$ 659.00
2150	0649790620101119	ECLIPSE MEDICAL IMAGING PC	8/14/2020	NF-3 Bill Form / HCFA 1500 Form	6/29/2020	73718	\$ 901.42
2151	0649790620101119	ECLIPSE MEDICAL IMAGING PC	8/14/2020	NF-3 Bill Form / HCFA 1500 Form	6/29/2020	73221	\$ 659.00
2152	0668197860000001	ECLIPSE MEDICAL IMAGING PC	8/14/2020	NF-3 Bill Form / HCFA 1500 Form	6/30/2020	72148	\$ 912.00
2153	0668197860000001	ECLIPSE MEDICAL IMAGING PC	8/14/2020	NF-3 Bill Form / HCFA 1500 Form	6/30/2020	72141	\$ 659.79
2154	0336847750101118	ECLIPSE MEDICAL IMAGING PC	8/14/2020	NF-3 Bill Form / HCFA 1500 Form	6/29/2020	73221	\$ 878.67
2155	0636118500101030	ECLIPSE MEDICAL IMAGING PC	8/14/2020	NF-3 Bill Form / HCFA 1500 Form	6/30/2020	72148	\$ 912.00
2156	0636118500101030	ECLIPSE MEDICAL IMAGING PC	8/14/2020	NF-3 Bill Form / HCFA 1500 Form	6/30/2020	72141	\$ 659.79
2157	0628198190000002	ECLIPSE MEDICAL IMAGING PC	8/14/2020	NF-3 Bill Form / HCFA 1500 Form	6/30/2020	72141	\$ 659.79
2158	0628198190000002	ECLIPSE MEDICAL IMAGING PC	8/14/2020	NF-3 Bill Form / HCFA 1500 Form	6/30/2020	72148	\$ 912.00
2159	0328944810101044	ECLIPSE MEDICAL IMAGING PC	8/14/2020	NF-3 Bill Form / HCFA 1500 Form	6/30/2020	73221	\$ 878.87
2160	0328944810101044	ECLIPSE MEDICAL IMAGING PC	8/14/2020	NF-3 Bill Form / HCFA 1500 Form	6/30/2020	73721	\$ 659.00
2161	0439777600101131	ECLIPSE MEDICAL IMAGING PC	7/28/2020	NF-3 Bill Form / HCFA 1500 Form	6/15/2020	73721	\$ 878.67
2162	0649790620101119	ECLIPSE MEDICAL IMAGING PC	8/17/2020	NF-3 Bill Form / HCFA 1500 Form	7/1/2020	73718	\$ 901.42
2163	0649790620101119	ECLIPSE MEDICAL IMAGING PC	8/17/2020	NF-3 Bill Form / HCFA 1500 Form	7/1/2020	73221	\$ 659.00
2164	0176082250101083	ECLIPSE MEDICAL IMAGING PC	8/17/2020	NF-3 Bill Form / HCFA 1500 Form	7/2/2020	73221	\$ 659.00
2165	0176082250101083	ECLIPSE MEDICAL IMAGING PC	8/17/2020	NF-3 Bill Form / HCFA 1500 Form	7/2/2020	72148	\$ 912.00
2166	0645706700000001	ECLIPSE MEDICAL IMAGING PC	8/17/2020	NF-3 Bill Form / HCFA 1500 Form	7/2/2020	70336	\$ 869.15
2167	0594669690000001	ECLIPSE MEDICAL IMAGING PC	8/17/2020	NF-3 Bill Form / HCFA 1500 Form	7/3/2020	73700	\$ 486.68
2168	0594669690000001	ECLIPSE MEDICAL IMAGING PC	8/17/2020	NF-3 Bill Form / HCFA 1500 Form	7/3/2020	72040	\$ 72.20
2169	0594669690000001	ECLIPSE MEDICAL IMAGING PC	8/17/2020	NF-3 Bill Form / HCFA 1500 Form	7/3/2020	73221	\$ 878.67
2170	0594669690000001	ECLIPSE MEDICAL IMAGING PC	8/17/2020	NF-3 Bill Form / HCFA 1500 Form	7/3/2020	72100	\$ 65.86

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Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
2171	0680110500000001	ECLIPSE MEDICAL IMAGING PC	8/17/2020	NF-3 Bill Form / HCFA 1500 Form	7/3/2020	73221	\$ 878.67
2172	0680110500000001	ECLIPSE MEDICAL IMAGING PC	8/17/2020	NF-3 Bill Form / HCFA 1500 Form	7/3/2020	70551	\$ 655.83
2173	0678976490000001	ECLIPSE MEDICAL IMAGING PC	8/17/2020	NF-3 Bill Form / HCFA 1500 Form	7/3/2020	73221	\$ 659.00
2174	0678976490000001	ECLIPSE MEDICAL IMAGING PC	8/17/2020	NF-3 Bill Form / HCFA 1500 Form	7/3/2020	72148	\$ 912.00
2175	0501232200101024	ECLIPSE MEDICAL IMAGING PC	8/17/2020	NF-3 Bill Form / HCFA 1500 Form	7/3/2020	73721	\$ 878.67
2176	0317123190101013	ECLIPSE MEDICAL IMAGING PC	8/17/2020	NF-3 Bill Form / HCFA 1500 Form	7/2/2020	73721	\$ 878.67
2177	0613982570000001	ECLIPSE MEDICAL IMAGING PC	8/24/2020	NF-3 Bill Form / HCFA 1500 Form	7/8/2020	72141	\$ 879.73
2178	0613982570000001	ECLIPSE MEDICAL IMAGING PC	8/24/2020	NF-3 Bill Form / HCFA 1500 Form	7/8/2020	73721	\$ 659.00
2179	0649790230000001	ECLIPSE MEDICAL IMAGING PC	8/24/2020	NF-3 Bill Form / HCFA 1500 Form	7/8/2020	73721	\$ 878.67
2180	0649790230000001	ECLIPSE MEDICAL IMAGING PC	8/24/2020	NF-3 Bill Form / HCFA 1500 Form	7/8/2020	73221	\$ 659.00
2181	0286181410101053	ECLIPSE MEDICAL IMAGING PC	8/24/2020	NF-3 Bill Form / HCFA 1500 Form	8/5/2020	72141	\$ 659.79
2182	0286181410101053	ECLIPSE MEDICAL IMAGING PC	8/24/2020	NF-3 Bill Form / HCFA 1500 Form	8/5/2020	72148	\$ 912.00
2183	0286181410101053	ECLIPSE MEDICAL IMAGING PC	8/24/2020	NF-3 Bill Form / HCFA 1500 Form	7/16/2020	73700	\$ 486.68
2184	0645706700000001	ECLIPSE MEDICAL IMAGING PC	8/24/2020	NF-3 Bill Form / HCFA 1500 Form	7/9/2020	72148	\$ 912.00
2185	0511425390101014	ECLIPSE MEDICAL IMAGING PC	8/24/2020	NF-3 Bill Form / HCFA 1500 Form	7/9/2020	70551	\$ 655.83
2186	0511425390101014	ECLIPSE MEDICAL IMAGING PC	8/24/2020	NF-3 Bill Form / HCFA 1500 Form	7/9/2020	72148	\$ 912.00
2187	0286181410101053	ECLIPSE MEDICAL IMAGING PC	8/24/2020	NF-3 Bill Form / HCFA 1500 Form	7/23/2020	73700	\$ 486.68
2188	0649790620101119	ECLIPSE MEDICAL IMAGING PC	8/24/2020	NF-3 Bill Form / HCFA 1500 Form	7/6/2020	72141	\$ 659.79
2189	0649790620101119	ECLIPSE MEDICAL IMAGING PC	8/24/2020	NF-3 Bill Form / HCFA 1500 Form	7/6/2020	72148	\$ 912.00
2190	0645706700000001	ECLIPSE MEDICAL IMAGING PC	8/24/2020	NF-3 Bill Form / HCFA 1500 Form	7/7/2020	72141	\$ 659.79
2191	0645706700000001	ECLIPSE MEDICAL IMAGING PC	8/24/2020	NF-3 Bill Form / HCFA 1500 Form	7/7/2020	72148	\$ 912.00
2192	0594669690000001	ECLIPSE MEDICAL IMAGING PC	8/25/2020	NF-3 Bill Form / HCFA 1500 Form	7/10/2020	73718	\$ 901.42
2193	0594669690000001	ECLIPSE MEDICAL IMAGING PC	8/27/2020	NF-3 Bill Form / HCFA 1500 Form	7/10/2020	73200	\$ 486.68
2194	0666834420000001	ECLIPSE MEDICAL IMAGING PC	8/25/2020	NF-3 Bill Form / HCFA 1500 Form	7/10/2020	72040	\$ 72.20
2195	0666834420000001	ECLIPSE MEDICAL IMAGING PC	8/25/2020	NF-3 Bill Form / HCFA 1500 Form	7/10/2020	72070	\$ 69.82
2196	0666834420000001	ECLIPSE MEDICAL IMAGING PC	8/25/2020	NF-3 Bill Form / HCFA 1500 Form	7/10/2020	72100	\$ 65.86
2197	0666834420000001	ECLIPSE MEDICAL IMAGING PC	8/25/2020	NF-3 Bill Form / HCFA 1500 Form	7/10/2020	72148	\$ 912.00
2198	0666834420000001	ECLIPSE MEDICAL IMAGING PC	8/25/2020	NF-3 Bill Form / HCFA 1500 Form	7/10/2020	72040	\$ 72.20
2199	0666834420000001	ECLIPSE MEDICAL IMAGING PC	8/25/2020	NF-3 Bill Form / HCFA 1500 Form	7/10/2020	72070	\$ 69.82
2200	0666834420000001	ECLIPSE MEDICAL IMAGING PC	8/25/2020	NF-3 Bill Form / HCFA 1500 Form	7/10/2020	72100	\$ 65.86
2201	0666834420000001	ECLIPSE MEDICAL IMAGING PC	8/25/2020	NF-3 Bill Form / HCFA 1500 Form	7/10/2020	72148	\$ 912.00
2202	0642075290101021	ECLIPSE MEDICAL IMAGING PC	8/31/2020	NF-3 Bill Form / HCFA 1500 Form	7/16/2020	72141	\$ 659.79
2203	0642075290101021	ECLIPSE MEDICAL IMAGING PC	8/31/2020	NF-3 Bill Form / HCFA 1500 Form	7/16/2020	72148	\$ 912.00
2204	0668089760000001	ECLIPSE MEDICAL IMAGING PC	8/31/2020	NF-3 Bill Form / HCFA 1500 Form	7/17/2020	72141	\$ 879.73
2205	0576406570000001	ECLIPSE MEDICAL IMAGING PC	8/31/2020	NF-3 Bill Form / HCFA 1500 Form	7/16/2020	72148	\$ 912.00
2206	0668089760000001	ECLIPSE MEDICAL IMAGING PC	8/31/2020	NF-3 Bill Form / HCFA 1500 Form	7/13/2020	72148	\$ 912.00
2207	0668089760000001	ECLIPSE MEDICAL IMAGING PC	8/31/2020	NF-3 Bill Form / HCFA 1500 Form	7/13/2020	73221	\$ 659.00
2208	0642075290101021	ECLIPSE MEDICAL IMAGING PC	8/31/2020	NF-3 Bill Form / HCFA 1500 Form	7/13/2020	73721	\$ 878.67
2209	0642075290101021	ECLIPSE MEDICAL IMAGING PC	8/31/2020	NF-3 Bill Form / HCFA 1500 Form	7/13/2020	73221	\$ 659.00
2210	0405154260101107	ECLIPSE MEDICAL IMAGING PC	8/31/2020	NF-3 Bill Form / HCFA 1500 Form	7/15/2020	73721	\$ 659.00
2211	0405154260101107	ECLIPSE MEDICAL IMAGING PC	8/31/2020	NF-3 Bill Form / HCFA 1500 Form	7/15/2020	72148	\$ 912.00
2212	0478314150105012	ECLIPSE MEDICAL IMAGING PC	8/31/2020	NF-3 Bill Form / HCFA 1500 Form	7/15/2020	73700	\$ 486.68
2213	0478314150105012	ECLIPSE MEDICAL IMAGING PC	8/31/2020	NF-3 Bill Form / HCFA 1500 Form	7/15/2020	73200	\$ 365.01
2214	0668089760000001	ECLIPSE MEDICAL IMAGING PC	8/31/2020	NF-3 Bill Form / HCFA 1500 Form	7/15/2020	73221	\$ 878.67
2215	0597169800000001	ECLIPSE MEDICAL IMAGING PC	8/31/2020	NF-3 Bill Form / HCFA 1500 Form	7/16/2020	73721	\$ 878.67
2216	0597169800000001	ECLIPSE MEDICAL IMAGING PC	8/31/2020	NF-3 Bill Form / HCFA 1500 Form	7/16/2020	73221	\$ 659.00
2217	0575514980101022	ECLIPSE MEDICAL IMAGING PC	8/31/2020	NF-3 Bill Form / HCFA 1500 Form	7/16/2020	73221	\$ 878.67
2218	0575514980101022	ECLIPSE MEDICAL IMAGING PC	8/31/2020	NF-3 Bill Form / HCFA 1500 Form	7/16/2020	72070	\$ 69.82
2219	0532578040101019	ECLIPSE MEDICAL IMAGING PC	8/31/2020	NF-3 Bill Form / HCFA 1500 Form	7/17/2020	73221	\$ 659.00
2220	0532578040101019	ECLIPSE MEDICAL IMAGING PC	8/31/2020	NF-3 Bill Form / HCFA 1500 Form	7/17/2020	72148	\$ 912.00
2221	0588959290101011	ECLIPSE MEDICAL IMAGING PC	9/4/2020	NF-3 Bill Form / HCFA 1500 Form	7/20/2020	73721	\$ 878.67
2222	0421456660101078	ECLIPSE MEDICAL IMAGING PC	9/4/2020	NF-3 Bill Form / HCFA 1500 Form	7/20/2020	72100	\$ 87.81
2223	0615628370101060	ECLIPSE MEDICAL IMAGING PC	9/4/2020	NF-3 Bill Form / HCFA 1500 Form	7/21/2020	72141	\$ 879.73
2224	0615628370101060	ECLIPSE MEDICAL IMAGING PC	9/4/2020	NF-3 Bill Form / HCFA 1500 Form	7/21/2020	72141	\$ 879.73
2225	0525076520000001	ECLIPSE MEDICAL IMAGING PC	9/4/2020	NF-3 Bill Form / HCFA 1500 Form	7/21/2020	72148	\$ 912.00
2226	0525076520000001	ECLIPSE MEDICAL IMAGING PC	9/4/2020	NF-3 Bill Form / HCFA 1500 Form	7/21/2020	72141	\$ 659.79
2227	0680110500000001	ECLIPSE MEDICAL IMAGING PC	9/4/2020	NF-3 Bill Form / HCFA 1500 Form	7/21/2020	73721	\$ 659.00
2228	0680110500000001	ECLIPSE MEDICAL IMAGING PC	9/4/2020	NF-3 Bill Form / HCFA 1500 Form	7/21/2020	73721	\$ 878.67
2229	0594669690000001	ECLIPSE MEDICAL IMAGING PC	9/4/2020	NF-3 Bill Form / HCFA 1500 Form	7/20/2020	73718	\$ 901.42
2230	0680110500000001	ECLIPSE MEDICAL IMAGING PC	9/4/2020	NF-3 Bill Form / HCFA 1500 Form	7/20/2020	73221	\$ 659.00
2231	0680110500000001	ECLIPSE MEDICAL IMAGING PC	9/4/2020	NF-3 Bill Form / HCFA 1500 Form	7/20/2020	73718	\$ 901.42
2232	0597169800000001	ECLIPSE MEDICAL IMAGING PC	9/4/2020	NF-3 Bill Form / HCFA 1500 Form	7/21/2020	73721	\$ 878.67
2233	0613982570000001	ECLIPSE MEDICAL IMAGING PC	9/4/2020	NF-3 Bill Form / HCFA 1500 Form	7/20/2020	72141	\$ 879.73
2234	0588959290101011	ECLIPSE MEDICAL IMAGING PC	9/8/2020	NF-3 Bill Form / HCFA 1500 Form	7/24/2020	73221	\$ 878.67
2235	0527624530101151	ECLIPSE MEDICAL IMAGING PC	9/8/2020	NF-3 Bill Form / HCFA 1500 Form	7/22/2020	72148	\$ 912.00
2236	0527624530101151	ECLIPSE MEDICAL IMAGING PC	9/8/2020	NF-3 Bill Form / HCFA 1500 Form	7/22/2020	73221	\$ 659.00
2237	0615881120101070	ECLIPSE MEDICAL IMAGING PC	9/8/2020	NF-3 Bill Form / HCFA 1500 Form	7/22/2020	72040	\$ 72.20
2238	0615881120101070	ECLIPSE MEDICAL IMAGING PC	9/8/2020	NF-3 Bill Form / HCFA 1500 Form	7/22/2020	73221	\$ 878.67
2239	0615881120101070	ECLIPSE MEDICAL IMAGING PC	9/8/2020	NF-3 Bill Form / HCFA 1500 Form	7/22/2020	72100	\$ 65.86
2240	0615881120101070	ECLIPSE MEDICAL IMAGING PC	9/8/2020	NF-3 Bill Form / HCFA 1500 Form	7/22/2020	72100	\$ 65.86

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Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
2241	0615881120101070	ECLIPSE MEDICAL IMAGING PC	9/8/2020	NF-3 Bill Form / HCFA 1500 Form	7/22/2020	72070	\$ 93.10
2242	0680110500000001	ECLIPSE MEDICAL IMAGING PC	9/8/2020	NF-3 Bill Form / HCFA 1500 Form	7/22/2020	73718	\$ 901.42
2243	0680110500000001	ECLIPSE MEDICAL IMAGING PC	9/8/2020	NF-3 Bill Form / HCFA 1500 Form	7/22/2020	72141	\$ 659.79
2244	0478314150105012	ECLIPSE MEDICAL IMAGING PC	9/8/2020	NF-3 Bill Form / HCFA 1500 Form	7/22/2020	72125	\$ 581.90
2245	0478314150105012	ECLIPSE MEDICAL IMAGING PC	9/8/2020	NF-3 Bill Form / HCFA 1500 Form	7/22/2020	72131	\$ 436.42
2246	0661269150000001	ECLIPSE MEDICAL IMAGING PC	9/8/2020	NF-3 Bill Form / HCFA 1500 Form	7/23/2020	72148	\$ 912.00
2247	0661269150000001	ECLIPSE MEDICAL IMAGING PC	9/8/2020	NF-3 Bill Form / HCFA 1500 Form	7/23/2020	72141	\$ 659.79
2248	0405154260101107	ECLIPSE MEDICAL IMAGING PC	9/8/2020	NF-3 Bill Form / HCFA 1500 Form	7/21/2020	72141	\$ 879.73
2249	0588959290101011	ECLIPSE MEDICAL IMAGING PC	9/8/2020	NF-3 Bill Form / HCFA 1500 Form	7/20/2020	73221	\$ 878.67
2250	0286181410101053	ECLIPSE MEDICAL IMAGING PC	9/8/2020	NF-3 Bill Form / HCFA 1500 Form	7/23/2020	73700	\$ 486.68
2251	0578317300000001	ECLIPSE MEDICAL IMAGING PC	9/8/2020	NF-3 Bill Form / HCFA 1500 Form	7/21/2020	73221	\$ 878.67
2252	0667991480000001	ECLIPSE MEDICAL IMAGING PC	9/8/2020	NF-3 Bill Form / HCFA 1500 Form	7/21/2020	73221	\$ 659.00
2253	0667991480000001	ECLIPSE MEDICAL IMAGING PC	9/8/2020	NF-3 Bill Form / HCFA 1500 Form	7/21/2020	72141	\$ 879.73
2254	0305032870101075	ECLIPSE MEDICAL IMAGING PC	9/8/2020	NF-3 Bill Form / HCFA 1500 Form	7/21/2020	72141	\$ 879.73
2255	0594669690000001	ECLIPSE MEDICAL IMAGING PC	9/8/2020	NF-3 Bill Form / HCFA 1500 Form	7/20/2020	73700	\$ 486.68
2256	0456533710000002	ECLIPSE MEDICAL IMAGING PC	9/8/2020	NF-3 Bill Form / HCFA 1500 Form	7/23/2020	72148	\$ 912.00
2257	0456533710000002	ECLIPSE MEDICAL IMAGING PC	9/8/2020	NF-3 Bill Form / HCFA 1500 Form	7/23/2020	73221	\$ 659.00
2258	0615881120101070	ECLIPSE MEDICAL IMAGING PC	9/8/2020	NF-3 Bill Form / HCFA 1500 Form	7/22/2020	73030	\$ 71.02
2259	0615881120101070	ECLIPSE MEDICAL IMAGING PC	9/8/2020	NF-3 Bill Form / HCFA 1500 Form	7/22/2020	73560	\$ 55.54
2260	0615881120101070	ECLIPSE MEDICAL IMAGING PC	9/8/2020	NF-3 Bill Form / HCFA 1500 Form	7/22/2020	73030	\$ 71.02
2261	0615881120101070	ECLIPSE MEDICAL IMAGING PC	9/8/2020	NF-3 Bill Form / HCFA 1500 Form	7/22/2020	72040	\$ 96.27
2262	0615881120101070	ECLIPSE MEDICAL IMAGING PC	9/8/2020	NF-3 Bill Form / HCFA 1500 Form	7/22/2020	72100	\$ 65.86
2263	0532578040101019	ECLIPSE MEDICAL IMAGING PC	9/8/2020	NF-3 Bill Form / HCFA 1500 Form	7/24/2020	72141	\$ 879.73
2264	0671145180000001	ECLIPSE MEDICAL IMAGING PC	9/11/2020	NF-3 Bill Form / HCFA 1500 Form	7/27/2020	73718	\$ 901.42
2265	0671145180000001	ECLIPSE MEDICAL IMAGING PC	9/11/2020	NF-3 Bill Form / HCFA 1500 Form	7/27/2020	73221	\$ 659.00
2266	0578317300000001	ECLIPSE MEDICAL IMAGING PC	9/11/2020	NF-3 Bill Form / HCFA 1500 Form	7/28/2020	72141	\$ 879.73
2267	0284390790101152	ECLIPSE MEDICAL IMAGING PC	9/11/2020	NF-3 Bill Form / HCFA 1500 Form	7/28/2020	73221	\$ 878.67
2268	0615881120101070	ECLIPSE MEDICAL IMAGING PC	9/11/2020	NF-3 Bill Form / HCFA 1500 Form	7/27/2020	73050	\$ 83.58
2269	0680110500000001	ECLIPSE MEDICAL IMAGING PC	9/11/2020	NF-3 Bill Form / HCFA 1500 Form	7/28/2020	73721	\$ 878.67
2270	0680110500000001	ECLIPSE MEDICAL IMAGING PC	9/11/2020	NF-3 Bill Form / HCFA 1500 Form	7/28/2020	73721	\$ 659.00
2271	0230541570101070	ECLIPSE MEDICAL IMAGING PC	9/14/2020	NF-3 Bill Form / HCFA 1500 Form	7/29/2020	72100	\$ 65.86
2272	0230541570101070	ECLIPSE MEDICAL IMAGING PC	9/14/2020	NF-3 Bill Form / HCFA 1500 Form	7/29/2020	72040	\$ 96.27
2273	0230541570101070	ECLIPSE MEDICAL IMAGING PC	9/14/2020	NF-3 Bill Form / HCFA 1500 Form	7/29/2020	73030	\$ 71.02
2274	0594669690000001	ECLIPSE MEDICAL IMAGING PC	9/14/2020	NF-3 Bill Form / HCFA 1500 Form	7/29/2020	73200	\$ 486.68
2275	0632269430000001	ECLIPSE MEDICAL IMAGING PC	9/14/2020	NF-3 Bill Form / HCFA 1500 Form	7/29/2020	73200	\$ 486.68
2276	0594669690000001	ECLIPSE MEDICAL IMAGING PC	9/14/2020	NF-3 Bill Form / HCFA 1500 Form	7/29/2020	72141	\$ 879.73
2277	0578317300000001	ECLIPSE MEDICAL IMAGING PC	9/14/2020	NF-3 Bill Form / HCFA 1500 Form	7/28/2020	73221	\$ 878.67
2278	0615628370101060	ECLIPSE MEDICAL IMAGING PC	9/14/2020	NF-3 Bill Form / HCFA 1500 Form	7/29/2020	72148	\$ 912.00
2279	0615628370101060	ECLIPSE MEDICAL IMAGING PC	9/14/2020	NF-3 Bill Form / HCFA 1500 Form	7/29/2020	73221	\$ 659.00
2280	0645575550000002	ECLIPSE MEDICAL IMAGING PC	9/14/2020	NF-3 Bill Form / HCFA 1500 Form	7/30/2020	73721	\$ 878.67
2281	0579802600101034	ECLIPSE MEDICAL IMAGING PC	9/14/2020	NF-3 Bill Form / HCFA 1500 Form	7/30/2020	72131	\$ 581.90
2282	0680110500000001	ECLIPSE MEDICAL IMAGING PC	9/14/2020	NF-3 Bill Form / HCFA 1500 Form	7/30/2020	73221	\$ 659.00
2283	0680110500000001	ECLIPSE MEDICAL IMAGING PC	9/14/2020	NF-3 Bill Form / HCFA 1500 Form	7/30/2020	73718	\$ 901.42
2284	0552872930101014	ECLIPSE MEDICAL IMAGING PC	9/14/2020	NF-3 Bill Form / HCFA 1500 Form	7/29/2020	73221	\$ 878.67
2285	0418433960000001	ECLIPSE MEDICAL IMAGING PC	9/14/2020	NF-3 Bill Form / HCFA 1500 Form	7/27/2020	73721	\$ 659.00
2286	0418433960000001	ECLIPSE MEDICAL IMAGING PC	9/14/2020	NF-3 Bill Form / HCFA 1500 Form	7/27/2020	72141	\$ 879.73
2287	0680110500000001	ECLIPSE MEDICAL IMAGING PC	9/14/2020	NF-3 Bill Form / HCFA 1500 Form	7/29/2020	72148	\$ 912.00
2288	0680110500000001	ECLIPSE MEDICAL IMAGING PC	9/14/2020	NF-3 Bill Form / HCFA 1500 Form	7/29/2020	72192	\$ 365.01
2289	0587529090101065	ECLIPSE MEDICAL IMAGING PC	9/15/2020	NF-3 Bill Form / HCFA 1500 Form	7/30/2020	72100	\$ 65.86
2290	0587529090101065	ECLIPSE MEDICAL IMAGING PC	9/15/2020	NF-3 Bill Form / HCFA 1500 Form	7/30/2020	72040	\$ 72.20
2291	0587529090101065	ECLIPSE MEDICAL IMAGING PC	9/15/2020	NF-3 Bill Form / HCFA 1500 Form	7/30/2020	72070	\$ 69.82
2292	0587529090101065	ECLIPSE MEDICAL IMAGING PC	9/15/2020	NF-3 Bill Form / HCFA 1500 Form	7/30/2020	73721	\$ 878.67
2293	0384534300101048	ECLIPSE MEDICAL IMAGING PC	9/17/2020	NF-3 Bill Form / HCFA 1500 Form	7/31/2020	73221	\$ 878.67
2294	0594669690000001	ECLIPSE MEDICAL IMAGING PC	9/17/2020	NF-3 Bill Form / HCFA 1500 Form	7/31/2020	72148	\$ 912.00
2295	0594669690000001	ECLIPSE MEDICAL IMAGING PC	9/17/2020	NF-3 Bill Form / HCFA 1500 Form	7/31/2020	72125	\$ 581.90
2296	0576406570000001	ECLIPSE MEDICAL IMAGING PC	9/17/2020	NF-3 Bill Form / HCFA 1500 Form	7/31/2020	72100	\$ 87.81
2297	0681984650000001	ECLIPSE MEDICAL IMAGING PC	9/17/2020	NF-3 Bill Form / HCFA 1500 Form	7/31/2020	72141	\$ 879.73
2298	0575514980101022	ECLIPSE MEDICAL IMAGING PC	9/16/2020	NF-3 Bill Form / HCFA 1500 Form	7/29/2020	72141	\$ 659.79
2299	0575514980101022	ECLIPSE MEDICAL IMAGING PC	9/16/2020	NF-3 Bill Form / HCFA 1500 Form	7/29/2020	72148	\$ 912.00
2300	0580601540101015	ECLIPSE MEDICAL IMAGING PC	9/18/2020	NF-3 Bill Form / HCFA 1500 Form	8/4/2020	72148	\$ 912.00
2301	8688310690000001	ECLIPSE MEDICAL IMAGING PC	9/18/2020	NF-3 Bill Form / HCFA 1500 Form	8/4/2020	73721	\$ 659.00
2302	8688310690000001	ECLIPSE MEDICAL IMAGING PC	9/18/2020	NF-3 Bill Form / HCFA 1500 Form	8/4/2020	73221	\$ 878.67
2303	0305032870101075	ECLIPSE MEDICAL IMAGING PC	9/18/2020	NF-3 Bill Form / HCFA 1500 Form	8/4/2020	72148	\$ 912.00
2304	0632269430000001	ECLIPSE MEDICAL IMAGING PC	9/18/2020	NF-3 Bill Form / HCFA 1500 Form	8/3/2020	70551	\$ 655.83
2305	0632269430000001	ECLIPSE MEDICAL IMAGING PC	9/18/2020	NF-3 Bill Form / HCFA 1500 Form	8/3/2020	73721	\$ 878.67
2306	0588959290101011	ECLIPSE MEDICAL IMAGING PC	9/18/2020	NF-3 Bill Form / HCFA 1500 Form	8/4/2020	72141	\$ 879.73
2307	0597169800000001	ECLIPSE MEDICAL IMAGING PC	9/18/2020	NF-3 Bill Form / HCFA 1500 Form	8/4/2020	72141	\$ 659.79
2308	0597169800000001	ECLIPSE MEDICAL IMAGING PC	9/18/2020	NF-3 Bill Form / HCFA 1500 Form	8/4/2020	72148	\$ 912.00
2309	0588959290101011	ECLIPSE MEDICAL IMAGING PC	9/21/2020	NF-3 Bill Form / HCFA 1500 Form	8/6/2020	72141	\$ 659.79
2310	0588959290101011	ECLIPSE MEDICAL IMAGING PC	9/21/2020	NF-3 Bill Form / HCFA 1500 Form	8/6/2020	72148	\$ 912.00

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Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
2311	0679714950000001	ECLIPSE MEDICAL IMAGING PC	9/21/2020	NF-3 Bill Form / HCFA 1500 Form	8/5/2020	72141	\$ 659.79
2312	0679714950000001	ECLIPSE MEDICAL IMAGING PC	9/21/2020	NF-3 Bill Form / HCFA 1500 Form	8/5/2020	72148	\$ 912.00
2313	0632269430000001	ECLIPSE MEDICAL IMAGING PC	9/21/2020	NF-3 Bill Form / HCFA 1500 Form	8/5/2020	73200	\$ 486.68
2314	0594669690000001	ECLIPSE MEDICAL IMAGING PC	9/21/2020	NF-3 Bill Form / HCFA 1500 Form	8/5/2020	72131	\$ 581.90
2315	0595135800000002	ECLIPSE MEDICAL IMAGING PC	9/21/2020	NF-3 Bill Form / HCFA 1500 Form	8/5/2020	73721	\$ 878.67
2316	0657960460000002	ECLIPSE MEDICAL IMAGING PC	9/21/2020	NF-3 Bill Form / HCFA 1500 Form	8/5/2020	73221	\$ 878.67
2317	0348932520101128	ECLIPSE MEDICAL IMAGING PC	9/21/2020	NF-3 Bill Form / HCFA 1500 Form	8/5/2020	72141	\$ 659.79
2318	0348932520101128	ECLIPSE MEDICAL IMAGING PC	9/21/2020	NF-3 Bill Form / HCFA 1500 Form	8/5/2020	72148	\$ 912.00
2319	0615628370101060	ECLIPSE MEDICAL IMAGING PC	9/21/2020	NF-3 Bill Form / HCFA 1500 Form	8/5/2020	72148	\$ 912.00
2320	0615628370101060	ECLIPSE MEDICAL IMAGING PC	9/21/2020	NF-3 Bill Form / HCFA 1500 Form	8/5/2020	73221	\$ 659.00
2321	0552872930101014	ECLIPSE MEDICAL IMAGING PC	9/21/2020	NF-3 Bill Form / HCFA 1500 Form	8/5/2020	72141	\$ 879.73
2322	0447805340101066	ECLIPSE MEDICAL IMAGING PC	9/22/2020	NF-3 Bill Form / HCFA 1500 Form	8/3/2020	73721	\$ 878.67
2323	0447805340101066	ECLIPSE MEDICAL IMAGING PC	9/22/2020	NF-3 Bill Form / HCFA 1500 Form	8/3/2020	73221	\$ 659.00
2324	0447805340101066	ECLIPSE MEDICAL IMAGING PC	9/22/2020	NF-3 Bill Form / HCFA 1500 Form	8/3/2020	72100	\$ 65.86
2325	0447805340101066	ECLIPSE MEDICAL IMAGING PC	9/22/2020	NF-3 Bill Form / HCFA 1500 Form	8/3/2020	72040	\$ 72.20
2326	0447805340101066	ECLIPSE MEDICAL IMAGING PC	9/22/2020	NF-3 Bill Form / HCFA 1500 Form	8/3/2020	73030	\$ 71.02
2327	0447805340101066	ECLIPSE MEDICAL IMAGING PC	9/22/2020	NF-3 Bill Form / HCFA 1500 Form	8/3/2020	73560	\$ 74.06
2328	0678932320000002	ECLIPSE MEDICAL IMAGING PC	9/24/2020	NF-3 Bill Form / HCFA 1500 Form	8/7/2020	73560	\$ 55.54
2329	0678932320000002	ECLIPSE MEDICAL IMAGING PC	9/24/2020	NF-3 Bill Form / HCFA 1500 Form	8/7/2020	73070	\$ 52.77
2330	0678932320000002	ECLIPSE MEDICAL IMAGING PC	9/24/2020	NF-3 Bill Form / HCFA 1500 Form	8/7/2020	72100	\$ 65.86
2331	0678932320000002	ECLIPSE MEDICAL IMAGING PC	9/24/2020	NF-3 Bill Form / HCFA 1500 Form	8/7/2020	72040	\$ 96.27
2332	0681658630000001	ECLIPSE MEDICAL IMAGING PC	9/24/2020	NF-3 Bill Form / HCFA 1500 Form	8/7/2020	73221	\$ 878.67
2333	0681984650000001	ECLIPSE MEDICAL IMAGING PC	9/24/2020	NF-3 Bill Form / HCFA 1500 Form	8/7/2020	72148	\$ 912.00
2334	0587529090101065	ECLIPSE MEDICAL IMAGING PC	9/24/2020	NF-3 Bill Form / HCFA 1500 Form	8/10/2020	73221	\$ 878.67
2335	0618297800000001	ECLIPSE MEDICAL IMAGING PC	9/24/2020	NF-3 Bill Form / HCFA 1500 Form	8/10/2020	73721	\$ 878.67
2336	0421456660101078	ECLIPSE MEDICAL IMAGING PC	9/25/2020	NF-3 Bill Form / HCFA 1500 Form	8/11/2020	72148	\$ 912.00
2337	0336847750101118	ECLIPSE MEDICAL IMAGING PC	9/25/2020	NF-3 Bill Form / HCFA 1500 Form	8/11/2020	72148	\$ 912.00
2338	0680110500000001	ECLIPSE MEDICAL IMAGING PC	9/25/2020	NF-3 Bill Form / HCFA 1500 Form	8/11/2020	72141	\$ 659.79
2339	0680110500000001	ECLIPSE MEDICAL IMAGING PC	9/25/2020	NF-3 Bill Form / HCFA 1500 Form	8/11/2020	72148	\$ 912.00
2340	0421456660101078	ECLIPSE MEDICAL IMAGING PC	9/25/2020	NF-3 Bill Form / HCFA 1500 Form	8/11/2020	73721	\$ 878.67
2341	0565569600000001	ECLIPSE MEDICAL IMAGING PC	9/28/2020	NF-3 Bill Form / HCFA 1500 Form	8/12/2020	73221	\$ 878.67
2342	0632269430000001	ECLIPSE MEDICAL IMAGING PC	9/28/2020	NF-3 Bill Form / HCFA 1500 Form	8/14/2020	73721	\$ 659.00
2343	0632269430000001	ECLIPSE MEDICAL IMAGING PC	9/28/2020	NF-3 Bill Form / HCFA 1500 Form	8/14/2020	72148	\$ 912.00
2344	0548338830101022	ECLIPSE MEDICAL IMAGING PC	9/28/2020	NF-3 Bill Form / HCFA 1500 Form	8/14/2020	73721	\$ 878.67
2345	0348197760101029	ECLIPSE MEDICAL IMAGING PC	9/28/2020	NF-3 Bill Form / HCFA 1500 Form	8/13/2020	73721	\$ 878.67
2346	0565569600000001	ECLIPSE MEDICAL IMAGING PC	9/28/2020	NF-3 Bill Form / HCFA 1500 Form	8/14/2020	72141	\$ 879.73
2347	0675727750000001	ECLIPSE MEDICAL IMAGING PC	9/28/2020	NF-3 Bill Form / HCFA 1500 Form	8/13/2020	72141	\$ 879.73
2348	0235347160101014	ECLIPSE MEDICAL IMAGING PC	9/28/2020	NF-3 Bill Form / HCFA 1500 Form	8/13/2020	73721	\$ 878.67
2349	0671145180000001	ECLIPSE MEDICAL IMAGING PC	9/18/2020	NF-3 Bill Form / HCFA 1500 Form	8/3/2020	72148	\$ 912.00
2350	0671145180000001	ECLIPSE MEDICAL IMAGING PC	9/18/2020	NF-3 Bill Form / HCFA 1500 Form	8/3/2020	72141	\$ 659.79
2351	0405322190101040	ECLIPSE MEDICAL IMAGING PC	9/28/2020	NF-3 Bill Form / HCFA 1500 Form	8/13/2020	72148	\$ 912.00
2352	0405322190101040	ECLIPSE MEDICAL IMAGING PC	9/28/2020	NF-3 Bill Form / HCFA 1500 Form	8/13/2020	73221	\$ 659.00
2353	0613982570000001	ECLIPSE MEDICAL IMAGING PC	9/28/2020	NF-3 Bill Form / HCFA 1500 Form	8/10/2020	72148	\$ 912.00
2354	0225125930101055	ECLIPSE MEDICAL IMAGING PC	9/28/2020	NF-3 Bill Form / HCFA 1500 Form	8/14/2020	73221	\$ 878.67
2355	0578317300000001	ECLIPSE MEDICAL IMAGING PC	9/28/2020	NF-3 Bill Form / HCFA 1500 Form	8/14/2020	72148	\$ 912.00
2356	0578317300000001	ECLIPSE MEDICAL IMAGING PC	9/28/2020	NF-3 Bill Form / HCFA 1500 Form	8/14/2020	72141	\$ 879.73
2357	0403399480000005	ECLIPSE MEDICAL IMAGING PC	9/28/2020	NF-3 Bill Form / HCFA 1500 Form	8/13/2020	72125	\$ 581.90
2358	0403399480000005	ECLIPSE MEDICAL IMAGING PC	9/28/2020	NF-3 Bill Form / HCFA 1500 Form	8/13/2020	72131	\$ 436.42
2359	0657362950000001	ECLIPSE MEDICAL IMAGING PC	9/23/2020	NF-3 Bill Form / HCFA 1500 Form	5/13/2020	72070	\$ 69.82
2360	0657362950000001	ECLIPSE MEDICAL IMAGING PC	9/23/2020	NF-3 Bill Form / HCFA 1500 Form	5/13/2020	73221	\$ 878.67
2361	0657362950000001	ECLIPSE MEDICAL IMAGING PC	9/23/2020	NF-3 Bill Form / HCFA 1500 Form	5/13/2020	72100	\$ 65.86
2362	0657362950000001	ECLIPSE MEDICAL IMAGING PC	9/23/2020	NF-3 Bill Form / HCFA 1500 Form	5/22/2020	72141	\$ 879.73
2363	0657362950000001	ECLIPSE MEDICAL IMAGING PC	9/23/2020	NF-3 Bill Form / HCFA 1500 Form	8/13/2020	72070	\$ 69.82
2364	0657362950000001	ECLIPSE MEDICAL IMAGING PC	9/23/2020	NF-3 Bill Form / HCFA 1500 Form	8/13/2020	73221	\$ 878.67
2365	0657362950000001	ECLIPSE MEDICAL IMAGING PC	9/23/2020	NF-3 Bill Form / HCFA 1500 Form	8/13/2020	72100	\$ 65.89
2366	0657362950000001	ECLIPSE MEDICAL IMAGING PC	9/23/2020	NF-3 Bill Form / HCFA 1500 Form	5/22/2020	72141	\$ 879.73
2367	0317123190101013	ECLIPSE MEDICAL IMAGING PC	9/29/2020	NF-3 Bill Form / HCFA 1500 Form	8/11/2020	72148	\$ 912.00
2368	0384543030101048	ECLIPSE MEDICAL IMAGING PC	9/30/2020	NF-3 Bill Form / HCFA 1500 Form	8/11/2020	72141	\$ 879.73
2369	0666419380000001	ECLIPSE MEDICAL IMAGING PC	9/30/2020	NF-3 Bill Form / HCFA 1500 Form	8/12/2020	73221	\$ 878.67
2370	0666419380000001	ECLIPSE MEDICAL IMAGING PC	9/30/2020	NF-3 Bill Form / HCFA 1500 Form	8/12/2020	73721	\$ 659.00
2371	0632269430000001	ECLIPSE MEDICAL IMAGING PC	10/2/2020	NF-3 Bill Form / HCFA 1500 Form	8/17/2020	72131	\$ 581.90
2372	0675727750000001	ECLIPSE MEDICAL IMAGING PC	10/2/2020	NF-3 Bill Form / HCFA 1500 Form	8/17/2020	73221	\$ 878.67
2373	0668508940000002	ECLIPSE MEDICAL IMAGING PC	10/2/2020	NF-3 Bill Form / HCFA 1500 Form	8/17/2020	72141	\$ 659.79
2374	0668508940000002	ECLIPSE MEDICAL IMAGING PC	10/2/2020	NF-3 Bill Form / HCFA 1500 Form	8/17/2020	72148	\$ 912.00
2375	0588959290101011	ECLIPSE MEDICAL IMAGING PC	10/5/2020	NF-3 Bill Form / HCFA 1500 Form	8/19/2020	73721	\$ 878.67
2376	0588959290101011	ECLIPSE MEDICAL IMAGING PC	10/5/2020	NF-3 Bill Form / HCFA 1500 Form	8/19/2020	72148	\$ 912.00
2377	0545460090101015	ECLIPSE MEDICAL IMAGING PC	10/5/2020	NF-3 Bill Form / HCFA 1500 Form	8/21/2020	72141	\$ 879.73
2378	0545460090101015	ECLIPSE MEDICAL IMAGING PC	10/5/2020	NF-3 Bill Form / HCFA 1500 Form	8/21/2020	72148	\$ 912.00
2379	0578317300000001	ECLIPSE MEDICAL IMAGING PC	10/5/2020	NF-3 Bill Form / HCFA 1500 Form	8/20/2020	71250	\$ 518.42
2380	0534695270101052	ECLIPSE MEDICAL IMAGING PC	10/5/2020	NF-3 Bill Form / HCFA 1500 Form	8/21/2020	70551	\$ 874.44

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Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
2381	0421456660101078	ECLIPSE MEDICAL IMAGING PC	10/5/2020	NF-3 Bill Form / HCFA 1500 Form	8/18/2020	73721	\$ 659.00
2382	0421456660101078	ECLIPSE MEDICAL IMAGING PC	10/5/2020	NF-3 Bill Form / HCFA 1500 Form	8/18/2020	72141	\$ 879.73
2383	0534695270101052	ECLIPSE MEDICAL IMAGING PC	10/5/2020	NF-3 Bill Form / HCFA 1500 Form	8/21/2020	73221	\$ 878.67
2384	0534384980000003	ECLIPSE MEDICAL IMAGING PC	10/5/2020	NF-3 Bill Form / HCFA 1500 Form	8/20/2020	73721	\$ 878.67
2385	0534384980000003	ECLIPSE MEDICAL IMAGING PC	10/5/2020	NF-3 Bill Form / HCFA 1500 Form	8/20/2020	72040	\$ 72.20
2386	0271239220101031	ECLIPSE MEDICAL IMAGING PC	10/5/2020	NF-3 Bill Form / HCFA 1500 Form	8/10/2020	72141	\$ 659.79
2387	0271239220101031	ECLIPSE MEDICAL IMAGING PC	10/5/2020	NF-3 Bill Form / HCFA 1500 Form	8/10/2020	72148	\$ 912.00
2388	0531998770101052	ECLIPSE MEDICAL IMAGING PC	10/5/2020	NF-3 Bill Form / HCFA 1500 Form	8/19/2020	73721	\$ 878.67
2389	0397778370101060	ECLIPSE MEDICAL IMAGING PC	10/6/2020	NF-3 Bill Form / HCFA 1500 Form	8/21/2020	73718	\$ 901.42
2390	0421456660101078	ECLIPSE MEDICAL IMAGING PC	10/6/2020	NF-3 Bill Form / HCFA 1500 Form	8/20/2020	72148	\$ 912.00
2391	0681336010000001	ECLIPSE MEDICAL IMAGING PC	10/6/2020	NF-3 Bill Form / HCFA 1500 Form	8/20/2020	72148	\$ 912.00
2392	0681336010000001	ECLIPSE MEDICAL IMAGING PC	10/6/2020	NF-3 Bill Form / HCFA 1500 Form	8/20/2020	72141	\$ 659.79
2393	0549722900101096	ECLIPSE MEDICAL IMAGING PC	10/7/2020	NF-3 Bill Form / HCFA 1500 Form	5/19/2020	72148	\$ 912.00
2394	0549722900101096	ECLIPSE MEDICAL IMAGING PC	10/7/2020	NF-3 Bill Form / HCFA 1500 Form	5/19/2020	73221	\$ 659.00
2395	0613982570000001	ECLIPSE MEDICAL IMAGING PC	10/8/2020	NF-3 Bill Form / HCFA 1500 Form	8/24/2020	72148	\$ 912.00
2396	0336847750101118	ECLIPSE MEDICAL IMAGING PC	10/8/2020	NF-3 Bill Form / HCFA 1500 Form	8/24/2020	72141	\$ 879.73
2397	0638538270000003	ECLIPSE MEDICAL IMAGING PC	10/8/2020	NF-3 Bill Form / HCFA 1500 Form	8/24/2020	73721	\$ 878.67
2398	0638538270000001	ECLIPSE MEDICAL IMAGING PC	10/8/2020	NF-3 Bill Form / HCFA 1500 Form	8/24/2020	70551	\$ 655.83
2399	0405322190101040	ECLIPSE MEDICAL IMAGING PC	10/8/2020	NF-3 Bill Form / HCFA 1500 Form	8/21/2020	72141	\$ 879.73
2400	0615881120101070	ECLIPSE MEDICAL IMAGING PC	10/12/2020	NF-3 Bill Form / HCFA 1500 Form	8/26/2020	72148	\$ 912.00
2401	0615881120101070	ECLIPSE MEDICAL IMAGING PC	10/12/2020	NF-3 Bill Form / HCFA 1500 Form	8/26/2020	72141	\$ 659.79
2402	0491414830101019	ECLIPSE MEDICAL IMAGING PC	10/12/2020	NF-3 Bill Form / HCFA 1500 Form	8/26/2020	73221	\$ 878.67
2403	0678932320000002	ECLIPSE MEDICAL IMAGING PC	10/12/2020	NF-3 Bill Form / HCFA 1500 Form	8/26/2020	73721	\$ 659.00
2404	0678932320000002	ECLIPSE MEDICAL IMAGING PC	10/12/2020	NF-3 Bill Form / HCFA 1500 Form	8/26/2020	72141	\$ 879.73
2405	0545460090101015	ECLIPSE MEDICAL IMAGING PC	10/12/2020	NF-3 Bill Form / HCFA 1500 Form	8/26/2020	72148	\$ 912.00
2406	0398217460101084	ECLIPSE MEDICAL IMAGING PC	10/9/2020	NF-3 Bill Form / HCFA 1500 Form	8/25/2020	72141	\$ 659.79
2407	0398217460101084	ECLIPSE MEDICAL IMAGING PC	10/9/2020	NF-3 Bill Form / HCFA 1500 Form	8/25/2020	72148	\$ 912.00
2408	0496471210000001	ECLIPSE MEDICAL IMAGING PC	10/12/2020	NF-3 Bill Form / HCFA 1500 Form	8/26/2020	72148	\$ 912.00
2409	0496471210000001	ECLIPSE MEDICAL IMAGING PC	10/12/2020	NF-3 Bill Form / HCFA 1500 Form	8/26/2020	73030	\$ 71.02
2410	0545460090101015	ECLIPSE MEDICAL IMAGING PC	10/12/2020	NF-3 Bill Form / HCFA 1500 Form	8/26/2020	72141	\$ 879.73
2411	0534384980000003	ECLIPSE MEDICAL IMAGING PC	10/13/2020	NF-3 Bill Form / HCFA 1500 Form	8/28/2020	72148	\$ 912.00
2412	0225125930101055	ECLIPSE MEDICAL IMAGING PC	10/13/2020	NF-3 Bill Form / HCFA 1500 Form	8/24/2020	72141	\$ 879.73
2413	0571312980101025	ECLIPSE MEDICAL IMAGING PC	10/13/2020	NF-3 Bill Form / HCFA 1500 Form	8/25/2020	73721	\$ 878.67
2414	0348932520101128	ECLIPSE MEDICAL IMAGING PC	9/17/2020	NF-3 Bill Form / HCFA 1500 Form	7/31/2020	73030	\$ 71.02
2415	0348932520101128	ECLIPSE MEDICAL IMAGING PC	9/17/2020	NF-3 Bill Form / HCFA 1500 Form	7/31/2020	72100	\$ 65.86
2416	0348932520101128	ECLIPSE MEDICAL IMAGING PC	9/17/2020	NF-3 Bill Form / HCFA 1500 Form	7/31/2020	73221	\$ 878.67
2417	0348932520101128	ECLIPSE MEDICAL IMAGING PC	9/17/2020	NF-3 Bill Form / HCFA 1500 Form	7/31/2020	72040	\$ 72.20
2418	0348932520101128	ECLIPSE MEDICAL IMAGING PC	9/17/2020	NF-3 Bill Form / HCFA 1500 Form	7/31/2020	72070	\$ 69.82
2419	0348932520101128	ECLIPSE MEDICAL IMAGING PC	9/17/2020	NF-3 Bill Form / HCFA 1500 Form	7/31/2020	73030	\$ 71.02
2420	0480578640101110	ECLIPSE MEDICAL IMAGING PC	10/13/2020	NF-3 Bill Form / HCFA 1500 Form	8/31/2020	72148	\$ 912.00
2421	0480578640101110	ECLIPSE MEDICAL IMAGING PC	10/13/2020	NF-3 Bill Form / HCFA 1500 Form	8/31/2020	73221	\$ 659.00
2422	0626981860000001	ECLIPSE MEDICAL IMAGING PC	10/14/2020	NF-3 Bill Form / HCFA 1500 Form	8/28/2020	73221	\$ 878.67
2423	0537930400101011	ECLIPSE MEDICAL IMAGING PC	10/14/2020	NF-3 Bill Form / HCFA 1500 Form	8/26/2020	73200	\$ 365.01
2424	0537930400101011	ECLIPSE MEDICAL IMAGING PC	10/14/2020	NF-3 Bill Form / HCFA 1500 Form	8/26/2020	72131	\$ 581.90
2425	0447805340101066	ECLIPSE MEDICAL IMAGING PC	10/14/2020	NF-3 Bill Form / HCFA 1500 Form	8/27/2020	72141	\$ 659.79
2426	0447805340101066	ECLIPSE MEDICAL IMAGING PC	10/14/2020	NF-3 Bill Form / HCFA 1500 Form	8/27/2020	72148	\$ 912.00
2427	0394852610101214	ECLIPSE MEDICAL IMAGING PC	10/15/2020	NF-3 Bill Form / HCFA 1500 Form	8/31/2020	73221	\$ 878.67
2428	0285546480101079	ECLIPSE MEDICAL IMAGING PC	10/15/2020	NF-3 Bill Form / HCFA 1500 Form	8/31/2020	73221	\$ 659.00
2429	0285546480101079	ECLIPSE MEDICAL IMAGING PC	10/15/2020	NF-3 Bill Form / HCFA 1500 Form	8/31/2020	73721	\$ 878.67
2430	0303562940101136	ECLIPSE MEDICAL IMAGING PC	10/15/2020	NF-3 Bill Form / HCFA 1500 Form	8/31/2020	73120	\$ 47.61
2431	0303562940101136	ECLIPSE MEDICAL IMAGING PC	10/15/2020	NF-3 Bill Form / HCFA 1500 Form	8/31/2020	72040	\$ 72.20
2432	0303562940101136	ECLIPSE MEDICAL IMAGING PC	10/15/2020	NF-3 Bill Form / HCFA 1500 Form	8/31/2020	73120	\$ 47.61
2433	0303562940101136	ECLIPSE MEDICAL IMAGING PC	10/15/2020	NF-3 Bill Form / HCFA 1500 Form	8/31/2020	73221	\$ 878.67
2434	0303562940101136	ECLIPSE MEDICAL IMAGING PC	10/15/2020	NF-3 Bill Form / HCFA 1500 Form	8/31/2020	72100	\$ 65.86
2435	0303562940101136	ECLIPSE MEDICAL IMAGING PC	10/15/2020	NF-3 Bill Form / HCFA 1500 Form	8/31/2020	72070	\$ 69.82
2436	0303562940101136	ECLIPSE MEDICAL IMAGING PC	10/15/2020	NF-3 Bill Form / HCFA 1500 Form	8/31/2020	72040	\$ 72.20
2437	0303562940101136	ECLIPSE MEDICAL IMAGING PC	10/15/2020	NF-3 Bill Form / HCFA 1500 Form	8/31/2020	73120	\$ 47.61
2438	0303562940101136	ECLIPSE MEDICAL IMAGING PC	10/15/2020	NF-3 Bill Form / HCFA 1500 Form	8/31/2020	73221	\$ 878.67
2439	0305032870101075	ECLIPSE MEDICAL IMAGING PC	10/16/2020	NF-3 Bill Form / HCFA 1500 Form	9/1/2020	73221	\$ 878.67
2440	0656285970000002	ECLIPSE MEDICAL IMAGING PC	10/19/2020	NF-3 Bill Form / HCFA 1500 Form	9/4/2020	70551	\$ 874.44
2441	0565673960101071	ECLIPSE MEDICAL IMAGING PC	10/19/2020	NF-3 Bill Form / HCFA 1500 Form	9/3/2020	73221	\$ 878.67
2442	0327040690101030	ECLIPSE MEDICAL IMAGING PC	10/19/2020	NF-3 Bill Form / HCFA 1500 Form	9/4/2020	73721	\$ 878.67
2443	0678555610000002	ECLIPSE MEDICAL IMAGING PC	10/19/2020	NF-3 Bill Form / HCFA 1500 Form	9/2/2020	73221	\$ 878.67
2444	0177165710101298	ECLIPSE MEDICAL IMAGING PC	10/19/2020	NF-3 Bill Form / HCFA 1500 Form	9/4/2020	72148	\$ 912.00
2445	0177165710101298	ECLIPSE MEDICAL IMAGING PC	10/19/2020	NF-3 Bill Form / HCFA 1500 Form	9/4/2020	72141	\$ 659.79
2446	0668509630000001	ECLIPSE MEDICAL IMAGING PC	10/20/2020	NF-3 Bill Form / HCFA 1500 Form	9/1/2020	73721	\$ 878.67
2447	0668509630000001	ECLIPSE MEDICAL IMAGING PC	10/20/2020	NF-3 Bill Form / HCFA 1500 Form	9/1/2020	73221	\$ 659.00
2448	0657960460000002	ECLIPSE MEDICAL IMAGING PC	10/20/2020	NF-3 Bill Form / HCFA 1500 Form	9/1/2020	73221	\$ 878.67
2449	0383097950101058	ECLIPSE MEDICAL IMAGING PC	10/20/2020	NF-3 Bill Form / HCFA 1500 Form	9/3/2020	72141	\$ 879.73
2450	0383097950101058	ECLIPSE MEDICAL IMAGING PC	10/20/2020	NF-3 Bill Form / HCFA 1500 Form	9/3/2020	73221	\$ 659.00

Government Employees Insurance Company, et al v. Eclipse Medical Imaging, et al
Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
2451	0397778370101060	ECLIPSE MEDICAL IMAGING PC	10/20/2020	NF-3 Bill Form / HCFA 1500 Form	9/3/2020	72148	\$ 912.00
2452	0656285970000002	ECLIPSE MEDICAL IMAGING PC	10/20/2020	NF-3 Bill Form / HCFA 1500 Form	9/4/2020	73721	\$ 878.67
2453	0383097950101058	ECLIPSE MEDICAL IMAGING PC	10/20/2020	NF-3 Bill Form / HCFA 1500 Form	9/1/2020	73221	\$ 659.00
2454	0383097950101058	ECLIPSE MEDICAL IMAGING PC	10/20/2020	NF-3 Bill Form / HCFA 1500 Form	9/1/2020	73221	\$ 878.67
2455	0348932520101128	ECLIPSE MEDICAL IMAGING PC	10/5/2020	NF-3 Bill Form / HCFA 1500 Form	8/21/2020	73221	\$ 878.67
2456	0285546480101079	ECLIPSE MEDICAL IMAGING PC	10/22/2020	NF-3 Bill Form / HCFA 1500 Form	9/4/2020	72141	\$ 879.73
2457	0285546480101079	ECLIPSE MEDICAL IMAGING PC	10/22/2020	NF-3 Bill Form / HCFA 1500 Form	9/4/2020	73218	\$ 574.49
2458	0666419380000001	ECLIPSE MEDICAL IMAGING PC	10/21/2020	NF-3 Bill Form / HCFA 1500 Form	9/1/2020	72141	\$ 659.79
2459	0666419380000001	ECLIPSE MEDICAL IMAGING PC	10/21/2020	NF-3 Bill Form / HCFA 1500 Form	9/1/2020	72148	\$ 912.00
2460	0668509630000001	ECLIPSE MEDICAL IMAGING PC	10/21/2020	NF-3 Bill Form / HCFA 1500 Form	9/4/2020	73221	\$ 878.67
2461	0403399480000005	ECLIPSE MEDICAL IMAGING PC	10/21/2020	NF-3 Bill Form / HCFA 1500 Form	9/1/2020	73721	\$ 878.67
2462	0333662920101025	ECLIPSE MEDICAL IMAGING PC	10/23/2020	NF-3 Bill Form / HCFA 1500 Form	9/7/2020	73721	\$ 878.67
2463	0678976490000001	ECLIPSE MEDICAL IMAGING PC	10/23/2020	NF-3 Bill Form / HCFA 1500 Form	9/2/2020	72141	\$ 879.73
2464	0615881120101070	ECLIPSE MEDICAL IMAGING PC	10/26/2020	NF-3 Bill Form / HCFA 1500 Form	9/7/2020	72148	\$ 912.00
2465	0615881120101070	ECLIPSE MEDICAL IMAGING PC	10/26/2020	NF-3 Bill Form / HCFA 1500 Form	9/7/2020	73221	\$ 659.00
2466	0587529090101065	ECLIPSE MEDICAL IMAGING PC	10/26/2020	NF-3 Bill Form / HCFA 1500 Form	9/10/2020	72141	\$ 879.73
2467	0537930400101011	ECLIPSE MEDICAL IMAGING PC	10/26/2020	NF-3 Bill Form / HCFA 1500 Form	9/9/2020	72125	\$ 581.90
2468	0594859490000001	ECLIPSE MEDICAL IMAGING PC	10/26/2020	NF-3 Bill Form / HCFA 1500 Form	9/10/2020	73200	\$ 486.68
2469	0587529090101065	ECLIPSE MEDICAL IMAGING PC	10/26/2020	NF-3 Bill Form / HCFA 1500 Form	9/10/2020	72148	\$ 912.00
2470	0383097950101058	ECLIPSE MEDICAL IMAGING PC	10/26/2020	NF-3 Bill Form / HCFA 1500 Form	9/8/2020	72148	\$ 912.00
2471	0275397000101014	ECLIPSE MEDICAL IMAGING PC	10/26/2020	NF-3 Bill Form / HCFA 1500 Form	9/10/2020	73700	\$ 486.68
2472	0545460090101015	ECLIPSE MEDICAL IMAGING PC	10/26/2020	NF-3 Bill Form / HCFA 1500 Form	9/10/2020	73221	\$ 878.67
2473	0665754930000003	ECLIPSE MEDICAL IMAGING PC	10/26/2020	NF-3 Bill Form / HCFA 1500 Form	9/10/2020	72131	\$ 581.90
2474	0665754930000003	ECLIPSE MEDICAL IMAGING PC	10/26/2020	NF-3 Bill Form / HCFA 1500 Form	9/10/2020	73200	\$ 365.01
2475	0285546480101079	ECLIPSE MEDICAL IMAGING PC	10/26/2020	NF-3 Bill Form / HCFA 1500 Form	9/8/2020	72148	\$ 912.00
2476	0512612060000002	ECLIPSE MEDICAL IMAGING PC	10/26/2020	NF-3 Bill Form / HCFA 1500 Form	9/7/2020	73721	\$ 878.67
2477	0512612060000002	ECLIPSE MEDICAL IMAGING PC	10/26/2020	NF-3 Bill Form / HCFA 1500 Form	9/7/2020	72070	\$ 69.82
2478	0512612060000002	ECLIPSE MEDICAL IMAGING PC	10/26/2020	NF-3 Bill Form / HCFA 1500 Form	9/7/2020	73140	\$ 40.06
2479	0678932320000002	ECLIPSE MEDICAL IMAGING PC	10/26/2020	NF-3 Bill Form / HCFA 1500 Form	9/9/2020	72148	\$ 912.00
2480	0678932320000002	ECLIPSE MEDICAL IMAGING PC	10/26/2020	NF-3 Bill Form / HCFA 1500 Form	9/9/2020	73221	\$ 659.00
2481	0545460090101015	ECLIPSE MEDICAL IMAGING PC	10/26/2020	NF-3 Bill Form / HCFA 1500 Form	9/10/2020	73221	\$ 878.67
2482	0480890260101039	ECLIPSE MEDICAL IMAGING PC	10/26/2020	NF-3 Bill Form / HCFA 1500 Form	9/9/2020	73221	\$ 878.67
2483	0480890260101039	ECLIPSE MEDICAL IMAGING PC	10/26/2020	NF-3 Bill Form / HCFA 1500 Form	9/9/2020	73030	\$ 71.02
2484	0480890260101039	ECLIPSE MEDICAL IMAGING PC	10/26/2020	NF-3 Bill Form / HCFA 1500 Form	9/9/2020	73721	\$ 659.00
2485	0480890260101039	ECLIPSE MEDICAL IMAGING PC	10/26/2020	NF-3 Bill Form / HCFA 1500 Form	9/9/2020	73560	\$ 55.54
2486	0480890260101039	ECLIPSE MEDICAL IMAGING PC	10/26/2020	NF-3 Bill Form / HCFA 1500 Form	9/9/2020	72040	\$ 72.20
2487	0327040690101030	ECLIPSE MEDICAL IMAGING PC	10/26/2020	NF-3 Bill Form / HCFA 1500 Form	9/4/2020	72141	\$ 879.73
2488	0379080430101020	ECLIPSE MEDICAL IMAGING PC	10/28/2020	NF-3 Bill Form / HCFA 1500 Form	9/9/2020	72141	\$ 659.79
2489	0379080430101020	ECLIPSE MEDICAL IMAGING PC	10/28/2020	NF-3 Bill Form / HCFA 1500 Form	9/9/2020	72148	\$ 912.00
2490	0668509630000001	ECLIPSE MEDICAL IMAGING PC	10/29/2020	NF-3 Bill Form / HCFA 1500 Form	9/14/2020	72141	\$ 879.73
2491	0638538270000001	ECLIPSE MEDICAL IMAGING PC	10/29/2020	NF-3 Bill Form / HCFA 1500 Form	9/14/2020	72141	\$ 659.79
2492	0638538270000001	ECLIPSE MEDICAL IMAGING PC	10/29/2020	NF-3 Bill Form / HCFA 1500 Form	9/14/2020	72148	\$ 912.00
2493	0348932520101128	ECLIPSE MEDICAL IMAGING PC	10/26/2020	NF-3 Bill Form / HCFA 1500 Form	9/8/2020	72141	\$ 659.79
2494	0348932520101128	ECLIPSE MEDICAL IMAGING PC	10/26/2020	NF-3 Bill Form / HCFA 1500 Form	9/8/2020	72148	\$ 912.00
2495	0327040690101030	ECLIPSE MEDICAL IMAGING PC	11/2/2020	NF-3 Bill Form / HCFA 1500 Form	9/15/2020	72141	\$ 879.73
2496	0480890260101039	ECLIPSE MEDICAL IMAGING PC	11/2/2020	NF-3 Bill Form / HCFA 1500 Form	9/15/2020	73721	\$ 878.67
2497	0327040690101030	ECLIPSE MEDICAL IMAGING PC	11/2/2020	NF-3 Bill Form / HCFA 1500 Form	9/15/2020	72148	\$ 912.00
2498	0548338830101022	ECLIPSE MEDICAL IMAGING PC	11/2/2020	NF-3 Bill Form / HCFA 1500 Form	9/15/2020	72148	\$ 912.00
2499	0668509630000001	ECLIPSE MEDICAL IMAGING PC	11/2/2020	NF-3 Bill Form / HCFA 1500 Form	9/15/2020	72141	\$ 879.73
2500	0303648870101039	ECLIPSE MEDICAL IMAGING PC	11/2/2020	NF-3 Bill Form / HCFA 1500 Form	9/18/2020	73721	\$ 878.67
2501	0303648870101039	ECLIPSE MEDICAL IMAGING PC	11/2/2020	NF-3 Bill Form / HCFA 1500 Form	9/18/2020	73221	\$ 659.00
2502	0656285970000002	ECLIPSE MEDICAL IMAGING PC	11/2/2020	NF-3 Bill Form / HCFA 1500 Form	9/16/2020	73721	\$ 659.00
2503	0656285970000002	ECLIPSE MEDICAL IMAGING PC	11/2/2020	NF-3 Bill Form / HCFA 1500 Form	9/16/2020	72141	\$ 879.73
2504	0615881120101070	ECLIPSE MEDICAL IMAGING PC	11/2/2020	NF-3 Bill Form / HCFA 1500 Form	9/18/2020	73221	\$ 878.67
2505	0545460090101015	ECLIPSE MEDICAL IMAGING PC	11/2/2020	NF-3 Bill Form / HCFA 1500 Form	9/16/2020	72148	\$ 912.00
2506	0545460090101015	ECLIPSE MEDICAL IMAGING PC	11/2/2020	NF-3 Bill Form / HCFA 1500 Form	9/14/2020	73721	\$ 659.00
2507	0545460090101015	ECLIPSE MEDICAL IMAGING PC	11/2/2020	NF-3 Bill Form / HCFA 1500 Form	9/14/2020	72141	\$ 879.73
2508	0328899450101085	ECLIPSE MEDICAL IMAGING PC	11/2/2020	NF-3 Bill Form / HCFA 1500 Form	9/17/2020	73221	\$ 878.67
2509	0328899450101085	ECLIPSE MEDICAL IMAGING PC	11/2/2020	NF-3 Bill Form / HCFA 1500 Form	9/17/2020	73721	\$ 659.00
2510	0451245360101089	ECLIPSE MEDICAL IMAGING PC	11/2/2020	NF-3 Bill Form / HCFA 1500 Form	9/16/2020	72040	\$ 72.20
2511	0451245360101089	ECLIPSE MEDICAL IMAGING PC	11/2/2020	NF-3 Bill Form / HCFA 1500 Form	9/16/2020	72100	\$ 65.86
2512	0451245360101089	ECLIPSE MEDICAL IMAGING PC	11/2/2020	NF-3 Bill Form / HCFA 1500 Form	9/16/2020	70551	\$ 874.44
2513	0665754930000003	ECLIPSE MEDICAL IMAGING PC	11/2/2020	NF-3 Bill Form / HCFA 1500 Form	9/14/2020	73200	\$ 486.68
2514	0628539660000002	ECLIPSE MEDICAL IMAGING PC	11/2/2020	NF-3 Bill Form / HCFA 1500 Form	9/16/2020	73221	\$ 878.67
2515	0628539660000002	ECLIPSE MEDICAL IMAGING PC	11/2/2020	NF-3 Bill Form / HCFA 1500 Form	9/16/2020	73721	\$ 659.00
2516	0665754930000003	ECLIPSE MEDICAL IMAGING PC	11/2/2020	NF-3 Bill Form / HCFA 1500 Form	9/17/2020	72125	\$ 581.90
2517	0571312980101025	ECLIPSE MEDICAL IMAGING PC	11/2/2020	NF-3 Bill Form / HCFA 1500 Form	9/17/2020	72141	\$ 659.79
2518	0571312980101025	ECLIPSE MEDICAL IMAGING PC	11/2/2020	NF-3 Bill Form / HCFA 1500 Form	9/17/2020	72148	\$ 912.00
2519	0626981860000001	ECLIPSE MEDICAL IMAGING PC	11/2/2020	NF-3 Bill Form / HCFA 1500 Form	9/14/2020	72148	\$ 912.00
2520	0626981860000001	ECLIPSE MEDICAL IMAGING PC	11/2/2020	NF-3 Bill Form / HCFA 1500 Form	9/14/2020	72141	\$ 659.79

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Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
2521	0230541570101070	ECLIPSE MEDICAL IMAGING PC	11/2/2020	NF-3 Bill Form / HCFA 1500 Form	9/17/2020	72148	\$ 912.00
2522	0230541570101070	ECLIPSE MEDICAL IMAGING PC	11/2/2020	NF-3 Bill Form / HCFA 1500 Form	9/17/2020	73221	\$ 659.00
2523	0615881120101070	ECLIPSE MEDICAL IMAGING PC	11/2/2020	NF-3 Bill Form / HCFA 1500 Form	9/16/2020	72148	\$ 912.00
2524	0615881120101070	ECLIPSE MEDICAL IMAGING PC	11/2/2020	NF-3 Bill Form / HCFA 1500 Form	9/16/2020	72141	\$ 659.79
2525	0678932320000002	ECLIPSE MEDICAL IMAGING PC	11/3/2020	NF-3 Bill Form / HCFA 1500 Form	9/18/2020	73030	\$ 94.69
2526	0656285970000002	ECLIPSE MEDICAL IMAGING PC	11/3/2020	NF-3 Bill Form / HCFA 1500 Form	9/18/2020	72141	\$ 659.79
2527	0656285970000002	ECLIPSE MEDICAL IMAGING PC	11/3/2020	NF-3 Bill Form / HCFA 1500 Form	9/18/2020	72148	\$ 912.00
2528	0167854090101015	ECLIPSE MEDICAL IMAGING PC	11/3/2020	NF-3 Bill Form / HCFA 1500 Form	9/17/2020	72100	\$ 65.86
2529	0167854090101015	ECLIPSE MEDICAL IMAGING PC	11/3/2020	NF-3 Bill Form / HCFA 1500 Form	9/17/2020	73030	\$ 71.02
2530	0167854090101015	ECLIPSE MEDICAL IMAGING PC	11/3/2020	NF-3 Bill Form / HCFA 1500 Form	9/17/2020	72040	\$ 72.20
2531	0167854090101015	ECLIPSE MEDICAL IMAGING PC	11/3/2020	NF-3 Bill Form / HCFA 1500 Form	9/17/2020	73030	\$ 71.02
2532	0167854090101015	ECLIPSE MEDICAL IMAGING PC	11/3/2020	NF-3 Bill Form / HCFA 1500 Form	9/17/2020	73221	\$ 878.67
2533	0384543030101048	ECLIPSE MEDICAL IMAGING PC	11/3/2020	NF-3 Bill Form / HCFA 1500 Form	9/18/2020	72148	\$ 912.00
2534	0230541570101070	ECLIPSE MEDICAL IMAGING PC	11/9/2020	NF-3 Bill Form / HCFA 1500 Form	9/24/2020	72141	\$ 879.73
2535	0561928670000001	ECLIPSE MEDICAL IMAGING PC	11/9/2020	NF-3 Bill Form / HCFA 1500 Form	9/23/2020	72070	\$ 69.82
2536	0561928670000001	ECLIPSE MEDICAL IMAGING PC	11/9/2020	NF-3 Bill Form / HCFA 1500 Form	9/23/2020	73221	\$ 878.67
2537	06378934570101015	ECLIPSE MEDICAL IMAGING PC	11/9/2020	NF-3 Bill Form / HCFA 1500 Form	9/22/2020	72148	\$ 912.00
2538	0468878640000001	ECLIPSE MEDICAL IMAGING PC	11/9/2020	NF-3 Bill Form / HCFA 1500 Form	9/22/2020	73221	\$ 659.00
2539	0468878640000001	ECLIPSE MEDICAL IMAGING PC	11/9/2020	NF-3 Bill Form / HCFA 1500 Form	9/22/2020	73721	\$ 878.67
2540	0587529090101065	ECLIPSE MEDICAL IMAGING PC	11/9/2020	NF-3 Bill Form / HCFA 1500 Form	9/21/2020	72148	\$ 912.00
2541	0648934570101016	ECLIPSE MEDICAL IMAGING PC	11/9/2020	NF-3 Bill Form / HCFA 1500 Form	9/25/2020	73721	\$ 878.67
2542	0680748530000001	ECLIPSE MEDICAL IMAGING PC	11/9/2020	NF-3 Bill Form / HCFA 1500 Form	9/25/2020	72141	\$ 659.79
2543	0680748530000001	ECLIPSE MEDICAL IMAGING PC	11/9/2020	NF-3 Bill Form / HCFA 1500 Form	9/25/2020	72148	\$ 912.00
2544	0328899450101085	ECLIPSE MEDICAL IMAGING PC	11/9/2020	NF-3 Bill Form / HCFA 1500 Form	9/24/2020	72141	\$ 879.73
2545	0628539660000002	ECLIPSE MEDICAL IMAGING PC	11/9/2020	NF-3 Bill Form / HCFA 1500 Form	9/24/2020	73030	\$ 71.02
2546	0628539660000002	ECLIPSE MEDICAL IMAGING PC	11/9/2020	NF-3 Bill Form / HCFA 1500 Form	9/24/2020	72070	\$ 69.82
2547	0628539660000002	ECLIPSE MEDICAL IMAGING PC	11/9/2020	NF-3 Bill Form / HCFA 1500 Form	9/24/2020	73030	\$ 71.02
2548	0628539660000002	ECLIPSE MEDICAL IMAGING PC	11/9/2020	NF-3 Bill Form / HCFA 1500 Form	9/24/2020	73718	\$ 901.42
2549	0628539660000002	ECLIPSE MEDICAL IMAGING PC	11/9/2020	NF-3 Bill Form / HCFA 1500 Form	9/24/2020	72100	\$ 65.86
2550	0587529090101065	ECLIPSE MEDICAL IMAGING PC	11/9/2020	NF-3 Bill Form / HCFA 1500 Form	9/21/2020	72141	\$ 879.73
2551	0659966100101021	ECLIPSE MEDICAL IMAGING PC	11/9/2020	NF-3 Bill Form / HCFA 1500 Form	9/21/2020	73221	\$ 878.67
2552	0659966100101021	ECLIPSE MEDICAL IMAGING PC	11/9/2020	NF-3 Bill Form / HCFA 1500 Form	9/21/2020	73700	\$ 365.01
2553	0328899450101085	ECLIPSE MEDICAL IMAGING PC	11/9/2020	NF-3 Bill Form / HCFA 1500 Form	9/22/2020	72148	\$ 912.00
2554	0328899450101085	ECLIPSE MEDICAL IMAGING PC	11/9/2020	NF-3 Bill Form / HCFA 1500 Form	9/22/2020	73221	\$ 659.00
2555	0312596940101042	ECLIPSE MEDICAL IMAGING PC	11/9/2020	NF-3 Bill Form / HCFA 1500 Form	9/24/2020	73221	\$ 878.67
2556	0503733750000001	ECLIPSE MEDICAL IMAGING PC	11/9/2020	NF-3 Bill Form / HCFA 1500 Form	9/21/2020	73221	\$ 878.67
2557	0595135800000002	ECLIPSE MEDICAL IMAGING PC	11/9/2020	NF-3 Bill Form / HCFA 1500 Form	9/25/2020	72141	\$ 879.73
2558	0595135800000002	ECLIPSE MEDICAL IMAGING PC	11/10/2020	NF-3 Bill Form / HCFA 1500 Form	9/25/2020	71100	\$ 66.65
2559	0595135800000002	ECLIPSE MEDICAL IMAGING PC	11/10/2020	NF-3 Bill Form / HCFA 1500 Form	9/25/2020	71100	\$ 66.65
2560	0531396300101012	ECLIPSE MEDICAL IMAGING PC	11/10/2020	NF-3 Bill Form / HCFA 1500 Form	9/24/2020	73221	\$ 659.00
2561	0531396300101012	ECLIPSE MEDICAL IMAGING PC	11/10/2020	NF-3 Bill Form / HCFA 1500 Form	9/24/2020	73721	\$ 878.67
2562	0649795250101018	ECLIPSE MEDICAL IMAGING PC	11/10/2020	NF-3 Bill Form / HCFA 1500 Form	9/25/2020	72040	\$ 96.27
2563	0649795250101018	ECLIPSE MEDICAL IMAGING PC	11/10/2020	NF-3 Bill Form / HCFA 1500 Form	9/25/2020	72100	\$ 65.86
2564	0649795250101018	ECLIPSE MEDICAL IMAGING PC	11/10/2020	NF-3 Bill Form / HCFA 1500 Form	9/25/2020	73030	\$ 71.02
2565	0327040690101030	ECLIPSE MEDICAL IMAGING PC	11/11/2020	NF-3 Bill Form / HCFA 1500 Form	9/23/2020	72148	\$ 912.00
2566	0177165710101298	ECLIPSE MEDICAL IMAGING PC	11/13/2020	NF-3 Bill Form / HCFA 1500 Form	9/30/2020	73221	\$ 878.67
2567	0534695270101052	ECLIPSE MEDICAL IMAGING PC	11/13/2020	NF-3 Bill Form / HCFA 1500 Form	9/29/2020	73221	\$ 878.67
2568	0679233010000001	ECLIPSE MEDICAL IMAGING PC	11/13/2020	NF-3 Bill Form / HCFA 1500 Form	9/29/2020	73718	\$ 901.42
2569	0679233010000001	ECLIPSE MEDICAL IMAGING PC	11/13/2020	NF-3 Bill Form / HCFA 1500 Form	9/29/2020	73721	\$ 659.00
2570	0659966100101021	ECLIPSE MEDICAL IMAGING PC	11/13/2020	NF-3 Bill Form / HCFA 1500 Form	9/24/2020	73221	\$ 878.67
2571	0659966100101021	ECLIPSE MEDICAL IMAGING PC	11/13/2020	NF-3 Bill Form / HCFA 1500 Form	9/24/2020	73700	\$ 365.01
2572	0656285970000002	ECLIPSE MEDICAL IMAGING PC	11/16/2020	NF-3 Bill Form / HCFA 1500 Form	9/21/2020	72148	\$ 912.00
2573	0362660100101058	ECLIPSE MEDICAL IMAGING PC	11/16/2020	NF-3 Bill Form / HCFA 1500 Form	10/1/2020	73700	\$ 486.68
2574	0403213250101040	ECLIPSE MEDICAL IMAGING PC	11/16/2020	NF-3 Bill Form / HCFA 1500 Form	10/1/2020	72100	\$ 65.86
2575	0403213250101040	ECLIPSE MEDICAL IMAGING PC	11/16/2020	NF-3 Bill Form / HCFA 1500 Form	10/1/2020	73030	\$ 71.02
2576	0403213250101040	ECLIPSE MEDICAL IMAGING PC	11/16/2020	NF-3 Bill Form / HCFA 1500 Form	10/1/2020	72070	\$ 69.82
2577	0403213250101040	ECLIPSE MEDICAL IMAGING PC	11/16/2020	NF-3 Bill Form / HCFA 1500 Form	10/1/2020	72040	\$ 96.27
2578	0531396300101012	ECLIPSE MEDICAL IMAGING PC	11/16/2020	NF-3 Bill Form / HCFA 1500 Form	10/1/2020	72148	\$ 912.00
2579	0531396300101012	ECLIPSE MEDICAL IMAGING PC	11/16/2020	NF-3 Bill Form / HCFA 1500 Form	10/1/2020	72141	\$ 659.79
2580	0523099430000001	ECLIPSE MEDICAL IMAGING PC	11/16/2020	NF-3 Bill Form / HCFA 1500 Form	10/1/2020	72040	\$ 96.27
2581	0523099430000001	ECLIPSE MEDICAL IMAGING PC	11/16/2020	NF-3 Bill Form / HCFA 1500 Form	10/1/2020	72100	\$ 65.86
2582	0594859490000001	ECLIPSE MEDICAL IMAGING PC	11/16/2020	NF-3 Bill Form / HCFA 1500 Form	10/1/2020	72070	\$ 69.82
2583	0594859490000001	ECLIPSE MEDICAL IMAGING PC	11/16/2020	NF-3 Bill Form / HCFA 1500 Form	10/1/2020	73030	\$ 71.02
2584	0594859490000001	ECLIPSE MEDICAL IMAGING PC	11/16/2020	NF-3 Bill Form / HCFA 1500 Form	10/1/2020	72100	\$ 65.86
2585	0594859490000001	ECLIPSE MEDICAL IMAGING PC	11/16/2020	NF-3 Bill Form / HCFA 1500 Form	10/1/2020	73110	\$ 52.77
2586	0594859490000001	ECLIPSE MEDICAL IMAGING PC	11/16/2020	NF-3 Bill Form / HCFA 1500 Form	10/1/2020	73030	\$ 71.02
2587	0594859490000001	ECLIPSE MEDICAL IMAGING PC	11/16/2020	NF-3 Bill Form / HCFA 1500 Form	10/1/2020	73221	\$ 878.67
2588	0473716450000002	ECLIPSE MEDICAL IMAGING PC	11/16/2020	NF-3 Bill Form / HCFA 1500 Form	10/1/2020	73070	\$ 52.77
2589	0473716450000002	ECLIPSE MEDICAL IMAGING PC	11/16/2020	NF-3 Bill Form / HCFA 1500 Form	10/1/2020	72100	\$ 65.86
2590	0473716450000002	ECLIPSE MEDICAL IMAGING PC	11/16/2020	NF-3 Bill Form / HCFA 1500 Form	10/1/2020	72040	\$ 72.20

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Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
2591	0473716450000002	ECLIPSE MEDICAL IMAGING PC	11/16/2020	NF-3 Bill Form / HCFA 1500 Form	10/1/2020	70551	\$ 874.44
2592	0473716450000002	ECLIPSE MEDICAL IMAGING PC	11/16/2020	NF-3 Bill Form / HCFA 1500 Form	10/1/2020	73110	\$ 52.77
2593	0473716450000002	ECLIPSE MEDICAL IMAGING PC	11/16/2020	NF-3 Bill Form / HCFA 1500 Form	10/1/2020	73120	\$ 47.61
2594	0512612060000002	ECLIPSE MEDICAL IMAGING PC	11/16/2020	NF-3 Bill Form / HCFA 1500 Form	10/1/2020	72141	\$ 879.73
2595	0678555610000002	ECLIPSE MEDICAL IMAGING PC	11/16/2020	NF-3 Bill Form / HCFA 1500 Form	10/1/2020	72148	\$ 912.00
2596	0678555610000002	ECLIPSE MEDICAL IMAGING PC	11/16/2020	NF-3 Bill Form / HCFA 1500 Form	10/1/2020	72141	\$ 659.79
2597	0468878640000001	ECLIPSE MEDICAL IMAGING PC	11/16/2020	NF-3 Bill Form / HCFA 1500 Form	10/1/2020	72148	\$ 912.00
2598	0468878640000001	ECLIPSE MEDICAL IMAGING PC	11/16/2020	NF-3 Bill Form / HCFA 1500 Form	10/1/2020	72141	\$ 659.79
2599	0531396300101012	ECLIPSE MEDICAL IMAGING PC	11/17/2020	NF-3 Bill Form / HCFA 1500 Form	9/29/2020	73721	\$ 878.67
2600	0531396300101012	ECLIPSE MEDICAL IMAGING PC	11/17/2020	NF-3 Bill Form / HCFA 1500 Form	9/29/2020	73221	\$ 659.00
2601	0534695270101052	ECLIPSE MEDICAL IMAGING PC	11/17/2020	NF-3 Bill Form / HCFA 1500 Form	9/29/2020	72141	\$ 879.73
2602	0409145280101081	ECLIPSE MEDICAL IMAGING PC	11/18/2020	NF-3 Bill Form / HCFA 1500 Form	10/2/2020	73221	\$ 878.67
2603	0348932520101128	ECLIPSE MEDICAL IMAGING PC	10/26/2020	NF-3 Bill Form / HCFA 1500 Form	9/8/2020	72141	\$ 659.79
2604	0348932520101128	ECLIPSE MEDICAL IMAGING PC	10/26/2020	NF-3 Bill Form / HCFA 1500 Form	9/8/2020	72148	\$ 912.00
2605	0535935820000001	ECLIPSE MEDICAL IMAGING PC	11/20/2020	NF-3 Bill Form / HCFA 1500 Form	10/2/2020	71100	\$ 66.65
2606	0535935820000001	ECLIPSE MEDICAL IMAGING PC	11/20/2020	NF-3 Bill Form / HCFA 1500 Form	10/2/2020	73221	\$ 878.67
2607	0535935820000001	ECLIPSE MEDICAL IMAGING PC	11/20/2020	NF-3 Bill Form / HCFA 1500 Form	10/2/2020	71120	\$ 58.71
2608	0535935820000001	ECLIPSE MEDICAL IMAGING PC	11/20/2020	NF-3 Bill Form / HCFA 1500 Form	10/2/2020	73140	\$ 40.06
2609	0535935820000001	ECLIPSE MEDICAL IMAGING PC	11/20/2020	NF-3 Bill Form / HCFA 1500 Form	10/2/2020	72040	\$ 72.20
2610	0535935820000001	ECLIPSE MEDICAL IMAGING PC	11/20/2020	NF-3 Bill Form / HCFA 1500 Form	10/2/2020	72100	\$ 65.86
2611	0535935820000001	ECLIPSE MEDICAL IMAGING PC	11/20/2020	NF-3 Bill Form / HCFA 1500 Form	10/2/2020	72070	\$ 69.82
2612	0535935820000001	ECLIPSE MEDICAL IMAGING PC	11/20/2020	NF-3 Bill Form / HCFA 1500 Form	10/2/2020	73030	\$ 71.02
2613	0529756120101026	ECLIPSE MEDICAL IMAGING PC	11/23/2020	NF-3 Bill Form / HCFA 1500 Form	10/6/2020	72148	\$ 912.00
2614	0529756120101026	ECLIPSE MEDICAL IMAGING PC	11/23/2020	NF-3 Bill Form / HCFA 1500 Form	10/6/2020	72141	\$ 659.79
2615	0338955370000002	ECLIPSE MEDICAL IMAGING PC	11/23/2020	NF-3 Bill Form / HCFA 1500 Form	10/12/2020	73221	\$ 659.00
2616	0338955370000002	ECLIPSE MEDICAL IMAGING PC	11/23/2020	NF-3 Bill Form / HCFA 1500 Form	10/12/2020	73721	\$ 878.67
2617	0324296810101036	ECLIPSE MEDICAL IMAGING PC	11/23/2020	NF-3 Bill Form / HCFA 1500 Form	10/12/2020	73221	\$ 878.67
2618	0292642750101104	ECLIPSE MEDICAL IMAGING PC	11/23/2020	NF-3 Bill Form / HCFA 1500 Form	10/9/2020	72148	\$ 912.00
2619	0668509630000001	ECLIPSE MEDICAL IMAGING PC	11/23/2020	NF-3 Bill Form / HCFA 1500 Form	10/8/2020	73721	\$ 659.00
2620	0668509630000001	ECLIPSE MEDICAL IMAGING PC	11/23/2020	NF-3 Bill Form / HCFA 1500 Form	10/8/2020	72148	\$ 912.00
2621	0679233010000001	ECLIPSE MEDICAL IMAGING PC	11/23/2020	NF-3 Bill Form / HCFA 1500 Form	10/7/2020	73070	\$ 52.77
2622	0679233010000001	ECLIPSE MEDICAL IMAGING PC	11/23/2020	NF-3 Bill Form / HCFA 1500 Form	10/7/2020	72040	\$ 96.27
2623	0679233010000001	ECLIPSE MEDICAL IMAGING PC	11/23/2020	NF-3 Bill Form / HCFA 1500 Form	10/7/2020	73560	\$ 55.54
2624	0679233010000001	ECLIPSE MEDICAL IMAGING PC	11/23/2020	NF-3 Bill Form / HCFA 1500 Form	10/7/2020	73501	\$ 62.68
2625	0679233010000001	ECLIPSE MEDICAL IMAGING PC	11/23/2020	NF-3 Bill Form / HCFA 1500 Form	10/7/2020	72100	\$ 65.86
2626	0595135800000002	ECLIPSE MEDICAL IMAGING PC	11/23/2020	NF-3 Bill Form / HCFA 1500 Form	10/6/2020	72148	\$ 912.00
2627	0496525860101136	ECLIPSE MEDICAL IMAGING PC	11/23/2020	NF-3 Bill Form / HCFA 1500 Form	10/12/2020	72141	\$ 879.73
2628	0667991480000001	ECLIPSE MEDICAL IMAGING PC	11/23/2020	NF-3 Bill Form / HCFA 1500 Form	10/12/2020	73221	\$ 659.00
2629	0667991480000001	ECLIPSE MEDICAL IMAGING PC	11/23/2020	NF-3 Bill Form / HCFA 1500 Form	10/12/2020	72148	\$ 912.00
2630	0303648870101039	ECLIPSE MEDICAL IMAGING PC	11/23/2020	NF-3 Bill Form / HCFA 1500 Form	10/5/2020	72141	\$ 659.79
2631	0303648870101039	ECLIPSE MEDICAL IMAGING PC	11/23/2020	NF-3 Bill Form / HCFA 1500 Form	10/5/2020	72148	\$ 912.00
2632	0683331690000001	ECLIPSE MEDICAL IMAGING PC	11/24/2020	NF-3 Bill Form / HCFA 1500 Form	10/5/2020	73721	\$ 878.67
2633	0338955370000002	ECLIPSE MEDICAL IMAGING PC	11/24/2020	NF-3 Bill Form / HCFA 1500 Form	10/5/2020	73221	\$ 878.67
2634	0338955370000002	ECLIPSE MEDICAL IMAGING PC	11/24/2020	NF-3 Bill Form / HCFA 1500 Form	10/5/2020	73030	\$ 71.02
2635	0338955370000002	ECLIPSE MEDICAL IMAGING PC	11/24/2020	NF-3 Bill Form / HCFA 1500 Form	10/5/2020	73560	\$ 55.54
2636	0338955370000002	ECLIPSE MEDICAL IMAGING PC	11/24/2020	NF-3 Bill Form / HCFA 1500 Form	10/5/2020	72070	\$ 69.82
2637	0338955370000002	ECLIPSE MEDICAL IMAGING PC	11/24/2020	NF-3 Bill Form / HCFA 1500 Form	10/5/2020	72100	\$ 65.86
2638	0338955370000002	ECLIPSE MEDICAL IMAGING PC	11/24/2020	NF-3 Bill Form / HCFA 1500 Form	10/5/2020	73030	\$ 71.02
2639	0338955370000002	ECLIPSE MEDICAL IMAGING PC	11/24/2020	NF-3 Bill Form / HCFA 1500 Form	10/5/2020	72040	\$ 72.20
2640	0547374060101011	ECLIPSE MEDICAL IMAGING PC	11/23/2020	NF-3 Bill Form / HCFA 1500 Form	10/5/2020	72141	\$ 659.79
2641	0547374060101011	ECLIPSE MEDICAL IMAGING PC	11/23/2020	NF-3 Bill Form / HCFA 1500 Form	10/5/2020	72148	\$ 912.00
2642	0179140530101054	ECLIPSE MEDICAL IMAGING PC	11/24/2020	NF-3 Bill Form / HCFA 1500 Form	10/9/2020	73221	\$ 878.67
2643	0649795250101018	ECLIPSE MEDICAL IMAGING PC	11/24/2020	NF-3 Bill Form / HCFA 1500 Form	10/9/2020	72148	\$ 912.00
2644	0469043050101034	ECLIPSE MEDICAL IMAGING PC	11/24/2020	NF-3 Bill Form / HCFA 1500 Form	10/12/2020	72040	\$ 72.20
2645	0469043050101034	ECLIPSE MEDICAL IMAGING PC	11/24/2020	NF-3 Bill Form / HCFA 1500 Form	10/12/2020	73221	\$ 878.67
2646	0469043050101034	ECLIPSE MEDICAL IMAGING PC	11/24/2020	NF-3 Bill Form / HCFA 1500 Form	10/12/2020	72070	\$ 69.82
2647	0340194520101119	ECLIPSE MEDICAL IMAGING PC	11/24/2020	NF-3 Bill Form / HCFA 1500 Form	10/12/2020	72100	\$ 65.86
2648	0340194520101119	ECLIPSE MEDICAL IMAGING PC	11/24/2020	NF-3 Bill Form / HCFA 1500 Form	10/12/2020	73721	\$ 878.67
2649	0594859490000001	ECLIPSE MEDICAL IMAGING PC	11/24/2020	NF-3 Bill Form / HCFA 1500 Form	10/9/2020	72148	\$ 912.00
2650	0594859490000001	ECLIPSE MEDICAL IMAGING PC	11/24/2020	NF-3 Bill Form / HCFA 1500 Form	10/9/2020	72141	\$ 659.79
2651	0128395360101235	ECLIPSE MEDICAL IMAGING PC	11/25/2020	NF-3 Bill Form / HCFA 1500 Form	10/8/2020	73200	\$ 486.68
2652	0292642750101104	ECLIPSE MEDICAL IMAGING PC	11/25/2020	NF-3 Bill Form / HCFA 1500 Form	10/8/2020	73221	\$ 659.00
2653	0292642750101104	ECLIPSE MEDICAL IMAGING PC	11/25/2020	NF-3 Bill Form / HCFA 1500 Form	10/8/2020	72148	\$ 912.00
2654	0679468000000001	ECLIPSE MEDICAL IMAGING PC	11/25/2020	NF-3 Bill Form / HCFA 1500 Form	10/12/2020	73030	\$ 71.02
2655	0679468000000001	ECLIPSE MEDICAL IMAGING PC	11/25/2020	NF-3 Bill Form / HCFA 1500 Form	10/12/2020	73560	\$ 55.54
2656	0679468000000001	ECLIPSE MEDICAL IMAGING PC	11/25/2020	NF-3 Bill Form / HCFA 1500 Form	10/12/2020	73030	\$ 71.02
2657	0679468000000001	ECLIPSE MEDICAL IMAGING PC	11/25/2020	NF-3 Bill Form / HCFA 1500 Form	10/12/2020	72070	\$ 69.82
2658	0679468000000001	ECLIPSE MEDICAL IMAGING PC	11/25/2020	NF-3 Bill Form / HCFA 1500 Form	10/12/2020	72100	\$ 65.86
2659	0679468000000001	ECLIPSE MEDICAL IMAGING PC	11/25/2020	NF-3 Bill Form / HCFA 1500 Form	10/12/2020	73560	\$ 55.54
2660	0679468000000001	ECLIPSE MEDICAL IMAGING PC	11/25/2020	NF-3 Bill Form / HCFA 1500 Form	10/12/2020	73721	\$ 878.67

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RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
2661	0679468000000001	ECLIPSE MEDICAL IMAGING PC	11/25/2020	NF-3 Bill Form / HCFA 1500 Form	10/12/2020	72040	\$ 72.20
2662	0679233010000001	ECLIPSE MEDICAL IMAGING PC	11/27/2020	NF-3 Bill Form / HCFA 1500 Form	10/14/2020	73700	\$ 365.01
2663	0679233010000001	ECLIPSE MEDICAL IMAGING PC	11/27/2020	NF-3 Bill Form / HCFA 1500 Form	10/14/2020	73721	\$ 878.67
2664	0451245360101089	ECLIPSE MEDICAL IMAGING PC	11/27/2020	NF-3 Bill Form / HCFA 1500 Form	10/13/2020	72141	\$ 659.79
2665	0451245360101089	ECLIPSE MEDICAL IMAGING PC	11/27/2020	NF-3 Bill Form / HCFA 1500 Form	10/13/2020	72148	\$ 912.00
2666	0628539660000002	ECLIPSE MEDICAL IMAGING PC	11/27/2020	NF-3 Bill Form / HCFA 1500 Form	10/13/2020	73221	\$ 878.67
2667	0476124500101023	ECLIPSE MEDICAL IMAGING PC	11/27/2020	NF-3 Bill Form / HCFA 1500 Form	10/14/2020	73221	\$ 878.67
2668	0481792050101106	ECLIPSE MEDICAL IMAGING PC	11/30/2020	NF-3 Bill Form / HCFA 1500 Form	10/14/2020	73221	\$ 878.67
2669	0460607620101160	ECLIPSE MEDICAL IMAGING PC	11/30/2020	NF-3 Bill Form / HCFA 1500 Form	10/16/2020	72148	\$ 912.00
2670	0519915790101012	ECLIPSE MEDICAL IMAGING PC	11/30/2020	NF-3 Bill Form / HCFA 1500 Form	10/16/2020	72148	\$ 912.00
2671	0519915790101012	ECLIPSE MEDICAL IMAGING PC	11/30/2020	NF-3 Bill Form / HCFA 1500 Form	10/16/2020	72141	\$ 659.79
2672	0387277390101097	ECLIPSE MEDICAL IMAGING PC	11/30/2020	NF-3 Bill Form / HCFA 1500 Form	10/19/2020	73221	\$ 878.67
2673	0565673960101071	ECLIPSE MEDICAL IMAGING PC	11/30/2020	NF-3 Bill Form / HCFA 1500 Form	10/19/2020	73221	\$ 878.67
2674	0340194520101119	ECLIPSE MEDICAL IMAGING PC	11/30/2020	NF-3 Bill Form / HCFA 1500 Form	10/19/2020	72040	\$ 72.20
2675	0340194520101119	ECLIPSE MEDICAL IMAGING PC	11/30/2020	NF-3 Bill Form / HCFA 1500 Form	10/19/2020	73721	\$ 878.67
2676	0340194520101119	ECLIPSE MEDICAL IMAGING PC	11/30/2020	NF-3 Bill Form / HCFA 1500 Form	10/19/2020	72070	\$ 69.82
2677	0460607620101160	ECLIPSE MEDICAL IMAGING PC	11/30/2020	NF-3 Bill Form / HCFA 1500 Form	10/13/2020	73721	\$ 659.00
2678	0460607620101160	ECLIPSE MEDICAL IMAGING PC	11/30/2020	NF-3 Bill Form / HCFA 1500 Form	10/13/2020	72141	\$ 879.73
2679	0221523420101029	ECLIPSE MEDICAL IMAGING PC	11/30/2020	NF-3 Bill Form / HCFA 1500 Form	10/13/2020	72141	\$ 879.73
2680	0476124500101023	ECLIPSE MEDICAL IMAGING PC	11/30/2020	NF-3 Bill Form / HCFA 1500 Form	10/16/2020	73221	\$ 878.67
2681	0476124500101023	ECLIPSE MEDICAL IMAGING PC	11/30/2020	NF-3 Bill Form / HCFA 1500 Form	10/16/2020	73721	\$ 659.00
2682	0523099430000001	ECLIPSE MEDICAL IMAGING PC	11/30/2020	NF-3 Bill Form / HCFA 1500 Form	10/13/2020	72148	\$ 912.00
2683	0523099430000001	ECLIPSE MEDICAL IMAGING PC	11/30/2020	NF-3 Bill Form / HCFA 1500 Form	10/13/2020	72141	\$ 659.79
2684	0477443870101068	ECLIPSE MEDICAL IMAGING PC	11/30/2020	NF-3 Bill Form / HCFA 1500 Form	10/14/2020	72148	\$ 912.00
2685	0477443870101068	ECLIPSE MEDICAL IMAGING PC	11/30/2020	NF-3 Bill Form / HCFA 1500 Form	10/14/2020	72141	\$ 659.79
2686	0547452820101017	ECLIPSE MEDICAL IMAGING PC	12/1/2020	NF-3 Bill Form / HCFA 1500 Form	10/19/2020	73221	\$ 878.67
2687	0561928670000001	ECLIPSE MEDICAL IMAGING PC	12/1/2020	NF-3 Bill Form / HCFA 1500 Form	10/15/2020	72148	\$ 912.00
2688	0561928670000001	ECLIPSE MEDICAL IMAGING PC	12/1/2020	NF-3 Bill Form / HCFA 1500 Form	10/15/2020	73560	\$ 55.54
2689	0561928670000001	ECLIPSE MEDICAL IMAGING PC	12/2/2020	NF-3 Bill Form / HCFA 1500 Form	10/13/2020	72141	\$ 879.73
2690	0561928670000001	ECLIPSE MEDICAL IMAGING PC	12/2/2020	NF-3 Bill Form / HCFA 1500 Form	10/13/2020	73721	\$ 659.00
2691	0682543470000001	ECLIPSE MEDICAL IMAGING PC	12/2/2020	NF-3 Bill Form / HCFA 1500 Form	10/16/2020	72148	\$ 912.00
2692	0682543470000001	ECLIPSE MEDICAL IMAGING PC	12/2/2020	NF-3 Bill Form / HCFA 1500 Form	10/16/2020	72141	\$ 659.79
2693	0682543470000001	ECLIPSE MEDICAL IMAGING PC	12/4/2020	NF-3 Bill Form / HCFA 1500 Form	10/20/2020	72148	\$ 1,003.19
2694	0682543470000001	ECLIPSE MEDICAL IMAGING PC	12/4/2020	NF-3 Bill Form / HCFA 1500 Form	10/20/2020	73221	\$ 724.91
2695	0534695270101052	ECLIPSE MEDICAL IMAGING PC	12/4/2020	NF-3 Bill Form / HCFA 1500 Form	10/20/2020	72148	\$ 1,003.19
2696	0534695270101052	ECLIPSE MEDICAL IMAGING PC	12/4/2020	NF-3 Bill Form / HCFA 1500 Form	10/20/2020	72141	\$ 967.70
2697	0630877990101017	ECLIPSE MEDICAL IMAGING PC	12/4/2020	NF-3 Bill Form / HCFA 1500 Form	10/21/2020	73721	\$ 966.54
2698	0603580360101011	ECLIPSE MEDICAL IMAGING PC	12/4/2020	NF-3 Bill Form / HCFA 1500 Form	10/20/2020	73221	\$ 966.54
2699	0534384980000003	ECLIPSE MEDICAL IMAGING PC	12/4/2020	NF-3 Bill Form / HCFA 1500 Form	10/15/2020	73221	\$ 878.67
2700	0301061640000001	ECLIPSE MEDICAL IMAGING PC	12/7/2020	NF-3 Bill Form / HCFA 1500 Form	10/23/2020	73721	\$ 724.91
2701	0301061640000001	ECLIPSE MEDICAL IMAGING PC	12/7/2020	NF-3 Bill Form / HCFA 1500 Form	10/23/2020	73221	\$ 966.54
2702	0362340960101031	ECLIPSE MEDICAL IMAGING PC	12/7/2020	NF-3 Bill Form / HCFA 1500 Form	10/22/2020	73721	\$ 966.54
2703	0514704650000001	ECLIPSE MEDICAL IMAGING PC	12/7/2020	NF-3 Bill Form / HCFA 1500 Form	10/23/2020	72148	\$ 1,003.19
2704	0626443450101016	ECLIPSE MEDICAL IMAGING PC	12/7/2020	NF-3 Bill Form / HCFA 1500 Form	10/22/2020	73221	\$ 966.54
2705	0362340960101031	ECLIPSE MEDICAL IMAGING PC	12/7/2020	NF-3 Bill Form / HCFA 1500 Form	10/22/2020	73221	\$ 966.54
2706	0301061640000001	ECLIPSE MEDICAL IMAGING PC	12/7/2020	NF-3 Bill Form / HCFA 1500 Form	10/22/2020	73721	\$ 724.91
2707	0301061640000001	ECLIPSE MEDICAL IMAGING PC	12/7/2020	NF-3 Bill Form / HCFA 1500 Form	10/22/2020	73221	\$ 966.54
2708	0476124500101023	ECLIPSE MEDICAL IMAGING PC	12/7/2020	NF-3 Bill Form / HCFA 1500 Form	10/23/2020	73221	\$ 966.54
2709	0626443450101016	ECLIPSE MEDICAL IMAGING PC	12/7/2020	NF-3 Bill Form / HCFA 1500 Form	10/22/2020	73721	\$ 966.54
2710	0303562940101136	ECLIPSE MEDICAL IMAGING PC	12/7/2020	NF-3 Bill Form / HCFA 1500 Form	10/22/2020	72148	\$ 1,003.19
2711	0312378960101112	ECLIPSE MEDICAL IMAGING PC	12/7/2020	NF-3 Bill Form / HCFA 1500 Form	10/22/2020	73221	\$ 966.54
2712	0514704650000001	ECLIPSE MEDICAL IMAGING PC	12/7/2020	NF-3 Bill Form / HCFA 1500 Form	10/23/2020	72141	\$ 967.70
2713	0669780050000001	ECLIPSE MEDICAL IMAGING PC	12/7/2020	NF-3 Bill Form / HCFA 1500 Form	10/22/2020	72148	\$ 1,003.19
2714	0438028290101025	ECLIPSE MEDICAL IMAGING PC	12/7/2020	NF-3 Bill Form / HCFA 1500 Form	10/15/2020	72100	\$ 65.86
2715	0438028290101025	ECLIPSE MEDICAL IMAGING PC	12/7/2020	NF-3 Bill Form / HCFA 1500 Form	10/15/2020	72040	\$ 96.27
2716	0476124500101023	ECLIPSE MEDICAL IMAGING PC	12/8/2020	NF-3 Bill Form / HCFA 1500 Form	10/22/2020	73221	\$ 724.91
2717	0476124500101023	ECLIPSE MEDICAL IMAGING PC	12/8/2020	NF-3 Bill Form / HCFA 1500 Form	10/22/2020	73721	\$ 966.54
2718	0647021880000002	ECLIPSE MEDICAL IMAGING PC	11/16/2020	NF-3 Bill Form / HCFA 1500 Form	10/1/2020	73700	\$ 486.68
2719	0585507560101046	ECLIPSE MEDICAL IMAGING PC	12/10/2020	NF-3 Bill Form / HCFA 1500 Form	10/26/2020	73560	\$ 61.10
2720	0585507560101046	ECLIPSE MEDICAL IMAGING PC	12/10/2020	NF-3 Bill Form / HCFA 1500 Form	10/26/2020	72070	\$ 76.81
2721	0585507560101046	ECLIPSE MEDICAL IMAGING PC	12/10/2020	NF-3 Bill Form / HCFA 1500 Form	10/26/2020	73030	\$ 104.16
2722	0585507560101046	ECLIPSE MEDICAL IMAGING PC	12/10/2020	NF-3 Bill Form / HCFA 1500 Form	10/26/2020	72100	\$ 72.45
2723	0473716450000002	ECLIPSE MEDICAL IMAGING PC	12/10/2020	NF-3 Bill Form / HCFA 1500 Form	10/26/2020	72148	\$ 1,003.19
2724	0350669830101020	ECLIPSE MEDICAL IMAGING PC	12/10/2020	NF-3 Bill Form / HCFA 1500 Form	10/26/2020	72148	\$ 1,003.19
2725	0324296810101036	ECLIPSE MEDICAL IMAGING PC	12/10/2020	NF-3 Bill Form / HCFA 1500 Form	10/26/2020	72141	\$ 967.70
2726	0679233010000001	ECLIPSE MEDICAL IMAGING PC	12/10/2020	NF-3 Bill Form / HCFA 1500 Form	10/26/2020	72141	\$ 967.70
2727	0682543470000001	ECLIPSE MEDICAL IMAGING PC	12/14/2020	NF-3 Bill Form / HCFA 1500 Form	10/27/2020	72141	\$ 967.70
2728	0312596940101042	ECLIPSE MEDICAL IMAGING PC	12/14/2020	NF-3 Bill Form / HCFA 1500 Form	10/27/2020	72141	\$ 967.70
2729	0179140530101054	ECLIPSE MEDICAL IMAGING PC	12/14/2020	NF-3 Bill Form / HCFA 1500 Form	10/27/2020	72148	\$ 1,003.19
2730	0630877990101017	ECLIPSE MEDICAL IMAGING PC	12/14/2020	NF-3 Bill Form / HCFA 1500 Form	10/28/2020	72141	\$ 725.77

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Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
2731	0630877990101017	ECLIPSE MEDICAL IMAGING PC	12/14/2020	NF-3 Bill Form / HCFA 1500 Form	10/28/2020	72148	\$ 1,003.19
2732	0300407930101021	ECLIPSE MEDICAL IMAGING PC	12/15/2020	NF-3 Bill Form / HCFA 1500 Form	10/26/2020	73721	\$ 724.91
2733	0300407930101021	ECLIPSE MEDICAL IMAGING PC	12/15/2020	NF-3 Bill Form / HCFA 1500 Form	10/26/2020	73560	\$ 61.10
2734	0300407930101021	ECLIPSE MEDICAL IMAGING PC	12/15/2020	NF-3 Bill Form / HCFA 1500 Form	10/26/2020	73030	\$ 78.12
2735	0300407930101021	ECLIPSE MEDICAL IMAGING PC	12/15/2020	NF-3 Bill Form / HCFA 1500 Form	10/26/2020	72040	\$ 79.42
2736	0300407930101021	ECLIPSE MEDICAL IMAGING PC	12/15/2020	NF-3 Bill Form / HCFA 1500 Form	10/26/2020	72100	\$ 72.45
2737	0300407930101021	ECLIPSE MEDICAL IMAGING PC	12/15/2020	NF-3 Bill Form / HCFA 1500 Form	10/26/2020	73221	\$ 966.54
2738	0481792050101106	ECLIPSE MEDICAL IMAGING PC	12/17/2020	NF-3 Bill Form / HCFA 1500 Form	10/29/2020	72141	\$ 725.77
2739	0481792050101106	ECLIPSE MEDICAL IMAGING PC	12/17/2020	NF-3 Bill Form / HCFA 1500 Form	10/29/2020	72148	\$ 1,003.19
2740	0362340960101031	ECLIPSE MEDICAL IMAGING PC	12/17/2020	NF-3 Bill Form / HCFA 1500 Form	10/30/2020	72141	\$ 725.77
2741	0362340960101031	ECLIPSE MEDICAL IMAGING PC	12/17/2020	NF-3 Bill Form / HCFA 1500 Form	10/30/2020	72148	\$ 1,003.19
2742	0514704650000001	ECLIPSE MEDICAL IMAGING PC	12/17/2020	NF-3 Bill Form / HCFA 1500 Form	10/30/2020	72148	\$ 1,003.19
2743	0476124500101023	ECLIPSE MEDICAL IMAGING PC	12/17/2020	NF-3 Bill Form / HCFA 1500 Form	10/30/2020	73721	\$ 966.54
2744	0626443450101016	ECLIPSE MEDICAL IMAGING PC	12/17/2020	NF-3 Bill Form / HCFA 1500 Form	10/29/2020	73721	\$ 966.54
2745	0362340960101031	ECLIPSE MEDICAL IMAGING PC	12/17/2020	NF-3 Bill Form / HCFA 1500 Form	10/29/2020	73721	\$ 724.91
2746	0362340960101031	ECLIPSE MEDICAL IMAGING PC	12/17/2020	NF-3 Bill Form / HCFA 1500 Form	10/29/2020	72141	\$ 967.70
2747	0626443450101016	ECLIPSE MEDICAL IMAGING PC	12/17/2020	NF-3 Bill Form / HCFA 1500 Form	10/29/2020	73221	\$ 966.54
2748	0397778370101061	ECLIPSE MEDICAL IMAGING PC	12/17/2020	NF-3 Bill Form / HCFA 1500 Form	10/29/2020	73221	\$ 966.54
2749	0300407930101021	ECLIPSE MEDICAL IMAGING PC	12/18/2020	NF-3 Bill Form / HCFA 1500 Form	10/27/2020	72141	\$ 725.77
2750	0300407930101021	ECLIPSE MEDICAL IMAGING PC	12/18/2020	NF-3 Bill Form / HCFA 1500 Form	10/27/2020	72148	\$ 1,003.19
2751	0680545890000001	ECLIPSE MEDICAL IMAGING PC	12/18/2020	NF-3 Bill Form / HCFA 1500 Form	10/27/2020	72148	\$ 1,003.19
2752	0128395360101235	ECLIPSE MEDICAL IMAGING PC	12/18/2020	NF-3 Bill Form / HCFA 1500 Form	10/28/2020	72131	\$ 640.09
2753	0128395360101235	ECLIPSE MEDICAL IMAGING PC	12/18/2020	NF-3 Bill Form / HCFA 1500 Form	10/28/2020	72125	\$ 480.07
2754	8700049380000001	ECLIPSE MEDICAL IMAGING PC	12/21/2020	NF-3 Bill Form / HCFA 1500 Form	11/2/2020	72070	\$ 76.81
2755	8700049380000001	ECLIPSE MEDICAL IMAGING PC	12/21/2020	NF-3 Bill Form / HCFA 1500 Form	11/2/2020	73221	\$ 966.54
2756	0547452820101017	ECLIPSE MEDICAL IMAGING PC	12/21/2020	NF-3 Bill Form / HCFA 1500 Form	11/2/2020	72148	\$ 1,003.19
2757	0547452820101017	ECLIPSE MEDICAL IMAGING PC	12/21/2020	NF-3 Bill Form / HCFA 1500 Form	11/2/2020	72141	\$ 725.77
2758	0312378960101112	ECLIPSE MEDICAL IMAGING PC	12/23/2020	NF-3 Bill Form / HCFA 1500 Form	10/29/2020	72040	\$ 79.42
2759	0312378960101112	ECLIPSE MEDICAL IMAGING PC	12/23/2020	NF-3 Bill Form / HCFA 1500 Form	10/29/2020	72141	\$ 725.77
2760	0312378960101112	ECLIPSE MEDICAL IMAGING PC	12/23/2020	NF-3 Bill Form / HCFA 1500 Form	10/29/2020	72148	\$ 1,003.19
2761	0549722900101096	ECLIPSE MEDICAL IMAGING PC	12/30/2020	NF-3 Bill Form / HCFA 1500 Form	5/19/2020	72148	\$ 912.00
2762	0549722900101096	ECLIPSE MEDICAL IMAGING PC	12/30/2020	NF-3 Bill Form / HCFA 1500 Form	5/19/2020	73221	\$ 659.00
2763	0473595570101061	ECLIPSE MEDICAL IMAGING PC	12/31/2020	NF-3 Bill Form / HCFA 1500 Form	11/9/2020	73030	\$ 104.16
2764	0473595570101061	ECLIPSE MEDICAL IMAGING PC	12/31/2020	NF-3 Bill Form / HCFA 1500 Form	11/9/2020	73030	\$ 78.12
2765	0473595570101061	ECLIPSE MEDICAL IMAGING PC	12/31/2020	NF-3 Bill Form / HCFA 1500 Form	11/9/2020	73560	\$ 61.10
2766	0479572890101020	ECLIPSE MEDICAL IMAGING PC	12/31/2020	NF-3 Bill Form / HCFA 1500 Form	11/9/2020	72040	\$ 79.42
2767	0479572890101020	ECLIPSE MEDICAL IMAGING PC	12/31/2020	NF-3 Bill Form / HCFA 1500 Form	11/9/2020	73221	\$ 966.54
2768	0301061640000001	ECLIPSE MEDICAL IMAGING PC	12/31/2020	NF-3 Bill Form / HCFA 1500 Form	11/10/2020	73721	\$ 966.54
2769	0301061640000001	ECLIPSE MEDICAL IMAGING PC	12/31/2020	NF-3 Bill Form / HCFA 1500 Form	11/10/2020	73221	\$ 966.54
2770	0439729140101045	ECLIPSE MEDICAL IMAGING PC	12/31/2020	NF-3 Bill Form / HCFA 1500 Form	11/9/2020	73721	\$ 966.54
2771	0362340960101031	ECLIPSE MEDICAL IMAGING PC	12/31/2020	NF-3 Bill Form / HCFA 1500 Form	11/10/2020	72148	\$ 1,003.19
2772	0476124500101023	ECLIPSE MEDICAL IMAGING PC	12/31/2020	NF-3 Bill Form / HCFA 1500 Form	11/9/2020	73221	\$ 966.54
2773	0626443450101016	ECLIPSE MEDICAL IMAGING PC	12/31/2020	NF-3 Bill Form / HCFA 1500 Form	11/13/2020	72141	\$ 967.70
2774	8699835120000001	ECLIPSE MEDICAL IMAGING PC	12/31/2020	NF-3 Bill Form / HCFA 1500 Form	11/16/2020	72040	\$ 105.90
2775	8699835120000001	ECLIPSE MEDICAL IMAGING PC	12/31/2020	NF-3 Bill Form / HCFA 1500 Form	11/16/2020	72100	\$ 72.45
2776	0453469910101021	ECLIPSE MEDICAL IMAGING PC	12/31/2020	NF-3 Bill Form / HCFA 1500 Form	11/16/2020	72148	\$ 1,003.19
2777	0453469910101021	ECLIPSE MEDICAL IMAGING PC	12/31/2020	NF-3 Bill Form / HCFA 1500 Form	11/16/2020	72141	\$ 725.77
2778	0670600500000001	ECLIPSE MEDICAL IMAGING PC	12/31/2020	NF-3 Bill Form / HCFA 1500 Form	11/11/2020	73070	\$ 58.04
2779	0670600500000001	ECLIPSE MEDICAL IMAGING PC	12/31/2020	NF-3 Bill Form / HCFA 1500 Form	11/11/2020	73221	\$ 966.54
2780	0670600500000001	ECLIPSE MEDICAL IMAGING PC	12/31/2020	NF-3 Bill Form / HCFA 1500 Form	11/11/2020	72100	\$ 72.45
2781	0682269450000001	ECLIPSE MEDICAL IMAGING PC	12/31/2020	NF-3 Bill Form / HCFA 1500 Form	11/11/2020	72040	\$ 105.90
2782	0682269450000001	ECLIPSE MEDICAL IMAGING PC	12/31/2020	NF-3 Bill Form / HCFA 1500 Form	11/11/2020	73120	\$ 52.37
2783	0682269450000001	ECLIPSE MEDICAL IMAGING PC	12/31/2020	NF-3 Bill Form / HCFA 1500 Form	11/11/2020	73110	\$ 58.04
2784	8700049380000001	ECLIPSE MEDICAL IMAGING PC	12/31/2020	NF-3 Bill Form / HCFA 1500 Form	11/16/2020	73221	\$ 966.54
2785	8700049380000001	ECLIPSE MEDICAL IMAGING PC	12/31/2020	NF-3 Bill Form / HCFA 1500 Form	11/16/2020	73120	\$ 52.37
2786	8700049380000001	ECLIPSE MEDICAL IMAGING PC	12/31/2020	NF-3 Bill Form / HCFA 1500 Form	11/16/2020	73721	\$ 724.91
2787	0439729140101045	ECLIPSE MEDICAL IMAGING PC	12/31/2020	NF-3 Bill Form / HCFA 1500 Form	11/16/2020	72141	\$ 725.77
2788	0439729140101045	ECLIPSE MEDICAL IMAGING PC	12/31/2020	NF-3 Bill Form / HCFA 1500 Form	11/16/2020	72148	\$ 1,003.19
2789	0305032870101075	ECLIPSE MEDICAL IMAGING PC	12/31/2020	NF-3 Bill Form / HCFA 1500 Form	11/13/2020	73221	\$ 966.54
2790	0476124500101023	ECLIPSE MEDICAL IMAGING PC	12/31/2020	NF-3 Bill Form / HCFA 1500 Form	11/16/2020	72148	\$ 1,003.19
2791	0804057650000002	ECLIPSE MEDICAL IMAGING PC	12/31/2020	NF-3 Bill Form / HCFA 1500 Form	11/16/2020	72100	\$ 72.45
2792	0804057650000002	ECLIPSE MEDICAL IMAGING PC	12/31/2020	NF-3 Bill Form / HCFA 1500 Form	11/16/2020	73221	\$ 966.54
2793	0804057650000002	ECLIPSE MEDICAL IMAGING PC	12/31/2020	NF-3 Bill Form / HCFA 1500 Form	11/16/2020	72040	\$ 79.42
2794	0305825580101031	ECLIPSE MEDICAL IMAGING PC	12/31/2020	NF-3 Bill Form / HCFA 1500 Form	11/12/2020	73721	\$ 966.54
2795	8700049380000001	ECLIPSE MEDICAL IMAGING PC	12/31/2020	NF-3 Bill Form / HCFA 1500 Form	11/13/2020	72148	\$ 1,003.19
2796	8700049380000001	ECLIPSE MEDICAL IMAGING PC	12/31/2020	NF-3 Bill Form / HCFA 1500 Form	11/13/2020	72141	\$ 725.77
2797	0626443450101016	ECLIPSE MEDICAL IMAGING PC	12/31/2020	NF-3 Bill Form / HCFA 1500 Form	11/11/2020	73221	\$ 966.54
2798	0679233010000001	ECLIPSE MEDICAL IMAGING PC	12/31/2020	NF-3 Bill Form / HCFA 1500 Form	11/13/2020	72148	\$ 1,003.19
2799	0476124500101023	ECLIPSE MEDICAL IMAGING PC	12/31/2020	NF-3 Bill Form / HCFA 1500 Form	11/16/2020	72141	\$ 967.70
2800	8696177890000001	ECLIPSE MEDICAL IMAGING PC	12/31/2020	NF-3 Bill Form / HCFA 1500 Form	11/16/2020	70551	\$ 961.88

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Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
2801	0626443450101016	ECLIPSE MEDICAL IMAGING PC	1/4/2021	NF-3 Bill Form / HCFA 1500 Form	11/19/2020	72146	\$ 1,055.57
2802	0804057650000002	ECLIPSE MEDICAL IMAGING PC	1/4/2021	NF-3 Bill Form / HCFA 1500 Form	11/23/2020	73721	\$ 966.54
2803	0659966100101021	ECLIPSE MEDICAL IMAGING PC	1/4/2021	NF-3 Bill Form / HCFA 1500 Form	11/20/2020	70450	\$ 375.76
2804	0659966100101021	ECLIPSE MEDICAL IMAGING PC	1/4/2021	NF-3 Bill Form / HCFA 1500 Form	11/20/2020	73221	\$ 966.54
2805	0385110150101115	ECLIPSE MEDICAL IMAGING PC	1/4/2021	NF-3 Bill Form / HCFA 1500 Form	11/23/2020	73721	\$ 966.54
2806	0397778370101061	ECLIPSE MEDICAL IMAGING PC	1/4/2021	NF-3 Bill Form / HCFA 1500 Form	11/20/2020	72148	\$ 1,003.19
2807	0476124500101023	ECLIPSE MEDICAL IMAGING PC	1/4/2021	NF-3 Bill Form / HCFA 1500 Form	11/23/2020	72148	\$ 1,003.19
2808	0626443450101016	ECLIPSE MEDICAL IMAGING PC	1/4/2021	NF-3 Bill Form / HCFA 1500 Form	11/19/2020	72146	\$ 1,055.57
2809	0681283250000003	ECLIPSE MEDICAL IMAGING PC	1/5/2021	NF-3 Bill Form / HCFA 1500 Form	11/17/2020	73721	\$ 966.54
2810	0510664220101017	ECLIPSE MEDICAL IMAGING PC	1/5/2021	NF-3 Bill Form / HCFA 1500 Form	11/17/2020	73721	\$ 966.54
2811	0301061640000001	ECLIPSE MEDICAL IMAGING PC	1/5/2021	NF-3 Bill Form / HCFA 1500 Form	11/17/2020	72148	\$ 1,003.19
2812	0301061640000001	ECLIPSE MEDICAL IMAGING PC	1/5/2021	NF-3 Bill Form / HCFA 1500 Form	11/17/2020	72141	\$ 967.70
2813	0253136110101177	ECLIPSE MEDICAL IMAGING PC	1/5/2021	NF-3 Bill Form / HCFA 1500 Form	11/18/2020	72148	\$ 1,003.19
2814	0253136110101177	ECLIPSE MEDICAL IMAGING PC	1/5/2021	NF-3 Bill Form / HCFA 1500 Form	11/18/2020	72141	\$ 725.77
2815	0626443450101016	ECLIPSE MEDICAL IMAGING PC	1/6/2021	NF-3 Bill Form / HCFA 1500 Form	11/12/2020	72141	\$ 725.77
2816	0626443450101016	ECLIPSE MEDICAL IMAGING PC	1/6/2021	NF-3 Bill Form / HCFA 1500 Form	11/12/2020	72148	\$ 1,003.19
2817	0438028290101025	ECLIPSE MEDICAL IMAGING PC	1/6/2021	NF-3 Bill Form / HCFA 1500 Form	11/19/2020	72148	\$ 1,003.19
2818	0438028290101025	ECLIPSE MEDICAL IMAGING PC	1/6/2021	NF-3 Bill Form / HCFA 1500 Form	11/19/2020	72141	\$ 725.77
2819	0199598690101213	ECLIPSE MEDICAL IMAGING PC	1/7/2021	NF-3 Bill Form / HCFA 1500 Form	11/18/2020	73721	\$ 724.91
2820	0199598690101213	ECLIPSE MEDICAL IMAGING PC	1/7/2021	NF-3 Bill Form / HCFA 1500 Form	11/18/2020	73221	\$ 966.54
2821	0679233010000001	ECLIPSE MEDICAL IMAGING PC	1/8/2021	NF-3 Bill Form / HCFA 1500 Form	10/7/2020	73070	\$ 52.77
2822	0679233010000001	ECLIPSE MEDICAL IMAGING PC	1/8/2021	NF-3 Bill Form / HCFA 1500 Form	10/7/2020	72040	\$ 96.27
2823	0679233010000001	ECLIPSE MEDICAL IMAGING PC	1/8/2021	NF-3 Bill Form / HCFA 1500 Form	10/7/2020	73560	\$ 55.54
2824	0679233010000001	ECLIPSE MEDICAL IMAGING PC	1/8/2021	NF-3 Bill Form / HCFA 1500 Form	10/7/2020	73501	\$ 62.68
2825	0679233010000001	ECLIPSE MEDICAL IMAGING PC	1/8/2021	NF-3 Bill Form / HCFA 1500 Form	10/7/2020	72100	\$ 65.86
2826	0387277390101097	ECLIPSE MEDICAL IMAGING PC	1/11/2021	NF-3 Bill Form / HCFA 1500 Form	11/9/2020	72141	\$ 725.77
2827	0387277390101097	ECLIPSE MEDICAL IMAGING PC	1/11/2021	NF-3 Bill Form / HCFA 1500 Form	11/9/2020	72148	\$ 1,003.19
2828	0324296810101036	ECLIPSE MEDICAL IMAGING PC	1/11/2021	NF-3 Bill Form / HCFA 1500 Form	11/24/2020	72148	\$ 1,003.19
2829	0479572890101020	ECLIPSE MEDICAL IMAGING PC	1/11/2021	NF-3 Bill Form / HCFA 1500 Form	11/25/2020	72148	\$ 1,003.19
2830	0626443450101016	ECLIPSE MEDICAL IMAGING PC	1/11/2021	NF-3 Bill Form / HCFA 1500 Form	11/6/2020	72148	\$ 1,003.19
2831	0626443450101016	ECLIPSE MEDICAL IMAGING PC	1/11/2021	NF-3 Bill Form / HCFA 1500 Form	11/6/2020	73221	\$ 724.90
2832	0682541040000001	ECLIPSE MEDICAL IMAGING PC	1/11/2021	NF-3 Bill Form / HCFA 1500 Form	11/3/2020	73221	\$ 966.54
2833	0571134170101058	ECLIPSE MEDICAL IMAGING PC	1/11/2021	NF-3 Bill Form / HCFA 1500 Form	11/4/2020	73718	\$ 991.56
2834	0571134170101058	ECLIPSE MEDICAL IMAGING PC	1/11/2021	NF-3 Bill Form / HCFA 1500 Form	11/4/2020	73721	\$ 724.91
2835	0510664220101017	ECLIPSE MEDICAL IMAGING PC	1/11/2021	NF-3 Bill Form / HCFA 1500 Form	11/5/2020	73721	\$ 966.54
2836	0301061640000001	ECLIPSE MEDICAL IMAGING PC	1/11/2021	NF-3 Bill Form / HCFA 1500 Form	11/3/2020	73721	\$ 966.54
2837	0397778370101061	ECLIPSE MEDICAL IMAGING PC	1/11/2021	NF-3 Bill Form / HCFA 1500 Form	11/30/2020	72141	\$ 967.70
2838	0496471210000001	ECLIPSE MEDICAL IMAGING PC	1/11/2021	NF-3 Bill Form / HCFA 1500 Form	11/30/2020	73221	\$ 966.54
2839	0628539660000002	ECLIPSE MEDICAL IMAGING PC	1/11/2021	NF-3 Bill Form / HCFA 1500 Form	11/30/2020	72148	\$ 1,003.19
2840	0571134170101058	ECLIPSE MEDICAL IMAGING PC	1/11/2021	NF-3 Bill Form / HCFA 1500 Form	11/30/2020	72141	\$ 967.70
2841	0571134170101058	ECLIPSE MEDICAL IMAGING PC	1/11/2021	NF-3 Bill Form / HCFA 1500 Form	11/30/2020	72192	\$ 401.51
2842	0683331690000001	ECLIPSE MEDICAL IMAGING PC	1/11/2021	NF-3 Bill Form / HCFA 1500 Form	11/4/2020	73221	\$ 966.54
2843	0683331690000001	ECLIPSE MEDICAL IMAGING PC	1/11/2021	NF-3 Bill Form / HCFA 1500 Form	11/4/2020	73721	\$ 724.91
2844	0476124500101023	ECLIPSE MEDICAL IMAGING PC	1/11/2021	NF-3 Bill Form / HCFA 1500 Form	11/24/2020	72141	\$ 967.70
2845	0276308560101053	ECLIPSE MEDICAL IMAGING PC	1/11/2021	NF-3 Bill Form / HCFA 1500 Form	11/6/2020	72141	\$ 725.77
2846	0276308560101053	ECLIPSE MEDICAL IMAGING PC	1/11/2021	NF-3 Bill Form / HCFA 1500 Form	11/6/2020	72148	\$ 1,003.19
2847	0385110150101115	ECLIPSE MEDICAL IMAGING PC	1/11/2021	NF-3 Bill Form / HCFA 1500 Form	11/9/2020	73221	\$ 724.90
2848	0385110150101115	ECLIPSE MEDICAL IMAGING PC	1/11/2021	NF-3 Bill Form / HCFA 1500 Form	11/9/2020	72148	\$ 1,003.19
2849	0700049380000001	ECLIPSE MEDICAL IMAGING PC	1/11/2021	NF-3 Bill Form / HCFA 1500 Form	11/23/2020	72141	\$ 967.70
2850	0301061640000001	ECLIPSE MEDICAL IMAGING PC	1/11/2021	NF-3 Bill Form / HCFA 1500 Form	11/24/2020	72141	\$ 967.70
2851	0661612600000001	ECLIPSE MEDICAL IMAGING PC	1/11/2021	NF-3 Bill Form / HCFA 1500 Form	11/24/2020	73721	\$ 966.54
2852	0647021880000002	ECLIPSE MEDICAL IMAGING PC	1/4/2021	NF-3 Bill Form / HCFA 1500 Form	11/19/2020	73721	\$ 966.54
2853	0301061640000001	ECLIPSE MEDICAL IMAGING PC	1/11/2021	NF-3 Bill Form / HCFA 1500 Form	11/3/2020	73221	\$ 966.54
2854	0403213250101040	ECLIPSE MEDICAL IMAGING PC	1/12/2021	NF-3 Bill Form / HCFA 1500 Form	11/5/2020	73221	\$ 724.90
2855	0403213250101040	ECLIPSE MEDICAL IMAGING PC	1/12/2021	NF-3 Bill Form / HCFA 1500 Form	11/5/2020	72148	\$ 1,003.19
2856	0682541040000001	ECLIPSE MEDICAL IMAGING PC	1/14/2021	NF-3 Bill Form / HCFA 1500 Form	11/4/2020	73030	\$ 78.12
2857	0682541040000001	ECLIPSE MEDICAL IMAGING PC	1/14/2021	NF-3 Bill Form / HCFA 1500 Form	11/4/2020	73100	\$ 51.06
2858	0682541040000001	ECLIPSE MEDICAL IMAGING PC	1/14/2021	NF-3 Bill Form / HCFA 1500 Form	11/4/2020	72070	\$ 76.81
2859	0682541040000001	ECLIPSE MEDICAL IMAGING PC	1/14/2021	NF-3 Bill Form / HCFA 1500 Form	11/4/2020	72100	\$ 72.45
2860	0682541040000001	ECLIPSE MEDICAL IMAGING PC	1/14/2021	NF-3 Bill Form / HCFA 1500 Form	11/4/2020	72040	\$ 105.90
2861	0305825580101031	ECLIPSE MEDICAL IMAGING PC	1/19/2021	NF-3 Bill Form / HCFA 1500 Form	12/3/2020	72141	\$ 725.77
2862	0305825580101031	ECLIPSE MEDICAL IMAGING PC	1/19/2021	NF-3 Bill Form / HCFA 1500 Form	12/3/2020	72148	\$ 1,003.19
2863	0205894240101014	ECLIPSE MEDICAL IMAGING PC	1/19/2021	NF-3 Bill Form / HCFA 1500 Form	12/3/2020	72141	\$ 967.70
2864	0286007100101014	ECLIPSE MEDICAL IMAGING PC	1/19/2021	NF-3 Bill Form / HCFA 1500 Form	12/2/2020	72141	\$ 967.70
2865	0419834740101017	ECLIPSE MEDICAL IMAGING PC	1/19/2021	NF-3 Bill Form / HCFA 1500 Form	12/1/2020	73721	\$ 966.54
2866	0804057650000002	ECLIPSE MEDICAL IMAGING PC	1/19/2021	NF-3 Bill Form / HCFA 1500 Form	12/7/2020	72148	\$ 1,003.19
2867	0804057650000002	ECLIPSE MEDICAL IMAGING PC	1/19/2021	NF-3 Bill Form / HCFA 1500 Form	12/7/2020	72141	\$ 725.77
2868	0656618660000003	ECLIPSE MEDICAL IMAGING PC	1/19/2021	NF-3 Bill Form / HCFA 1500 Form	12/7/2020	70551	\$ 961.88
2869	0656618660000003	ECLIPSE MEDICAL IMAGING PC	1/19/2021	NF-3 Bill Form / HCFA 1500 Form	12/7/2020	72100	\$ 72.45
2870	0656618660000003	ECLIPSE MEDICAL IMAGING PC	1/19/2021	NF-3 Bill Form / HCFA 1500 Form	12/7/2020	72040	\$ 79.42

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Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
2871	0318042610101016	ECLIPSE MEDICAL IMAGING PC	1/19/2021	NF-3 Bill Form / HCFA 1500 Form	12/2/2020	72148	\$ 1,003.19
2872	0318042610101016	ECLIPSE MEDICAL IMAGING PC	1/19/2021	NF-3 Bill Form / HCFA 1500 Form	12/2/2020	73221	\$ 724.90
2873	0340194520101119	ECLIPSE MEDICAL IMAGING PC	1/19/2021	NF-3 Bill Form / HCFA 1500 Form	12/2/2020	72141	\$ 967.70
2874	8703158190000001	ECLIPSE MEDICAL IMAGING PC	1/19/2021	NF-3 Bill Form / HCFA 1500 Form	12/3/2020	72141	\$ 725.77
2875	8703158190000001	ECLIPSE MEDICAL IMAGING PC	1/19/2021	NF-3 Bill Form / HCFA 1500 Form	12/3/2020	72148	\$ 1,003.19
2876	8700049380000001	ECLIPSE MEDICAL IMAGING PC	1/19/2021	NF-3 Bill Form / HCFA 1500 Form	12/1/2020	72148	\$ 1,003.19
2877	0682269450000001	ECLIPSE MEDICAL IMAGING PC	1/19/2021	NF-3 Bill Form / HCFA 1500 Form	12/4/2020	72148	\$ 1,003.19
2878	0656108030000001	ECLIPSE MEDICAL IMAGING PC	1/25/2021	NF-3 Bill Form / HCFA 1500 Form	12/9/2020	73718	\$ 991.56
2879	0653382000000001	ECLIPSE MEDICAL IMAGING PC	1/25/2021	NF-3 Bill Form / HCFA 1500 Form	12/9/2020	73721	\$ 966.54
2880	0604275380101013	ECLIPSE MEDICAL IMAGING PC	1/25/2021	NF-3 Bill Form / HCFA 1500 Form	12/8/2020	70551	\$ 961.88
2881	8699835120000001	ECLIPSE MEDICAL IMAGING PC	1/25/2021	NF-3 Bill Form / HCFA 1500 Form	12/8/2020	72148	\$ 1,003.19
2882	8699835120000001	ECLIPSE MEDICAL IMAGING PC	1/25/2021	NF-3 Bill Form / HCFA 1500 Form	12/8/2020	72141	\$ 725.77
2883	0340194520101119	ECLIPSE MEDICAL IMAGING PC	1/25/2021	NF-3 Bill Form / HCFA 1500 Form	12/11/2020	72148	\$ 1,003.19
2884	0659742280000001	ECLIPSE MEDICAL IMAGING PC	1/25/2021	NF-3 Bill Form / HCFA 1500 Form	12/14/2020	70551	\$ 721.41
2885	0659742280000001	ECLIPSE MEDICAL IMAGING PC	1/25/2021	NF-3 Bill Form / HCFA 1500 Form	12/14/2020	73721	\$ 966.54
2886	0571134170101058	ECLIPSE MEDICAL IMAGING PC	1/25/2021	NF-3 Bill Form / HCFA 1500 Form	12/9/2020	72148	\$ 1,003.19
2887	0576316160000001	ECLIPSE MEDICAL IMAGING PC	1/25/2021	NF-3 Bill Form / HCFA 1500 Form	12/14/2020	70551	\$ 961.88
2888	0576316160000001	ECLIPSE MEDICAL IMAGING PC	1/25/2021	NF-3 Bill Form / HCFA 1500 Form	12/14/2020	72040	\$ 79.42
2889	0576316160000001	ECLIPSE MEDICAL IMAGING PC	1/25/2021	NF-3 Bill Form / HCFA 1500 Form	12/14/2020	74176	\$ 308.11
2890	0576316160000001	ECLIPSE MEDICAL IMAGING PC	1/25/2021	NF-3 Bill Form / HCFA 1500 Form	12/14/2020	72100	\$ 72.45
2891	0552021760000002	ECLIPSE MEDICAL IMAGING PC	1/27/2021	NF-3 Bill Form / HCFA 1500 Form	12/10/2020	73721	\$ 966.54
2892	0292642750101104	ECLIPSE MEDICAL IMAGING PC	1/27/2021	NF-3 Bill Form / HCFA 1500 Form	12/10/2020	72141	\$ 967.70
2893	0661612600000001	ECLIPSE MEDICAL IMAGING PC	1/27/2021	NF-3 Bill Form / HCFA 1500 Form	12/10/2020	72141	\$ 967.70
2894	0609019050101021	ECLIPSE MEDICAL IMAGING PC	1/27/2021	NF-3 Bill Form / HCFA 1500 Form	12/14/2020	72141	\$ 967.70
2895	0683331690000001	ECLIPSE MEDICAL IMAGING PC	1/27/2021	NF-3 Bill Form / HCFA 1500 Form	12/11/2020	72148	\$ 1,003.19
2896	0683331690000001	ECLIPSE MEDICAL IMAGING PC	1/27/2021	NF-3 Bill Form / HCFA 1500 Form	12/11/2020	72141	\$ 725.77
2897	0205894240101014	ECLIPSE MEDICAL IMAGING PC	1/27/2021	NF-3 Bill Form / HCFA 1500 Form	12/11/2020	72148	\$ 1,003.19
2898	8672748810000001	ECLIPSE MEDICAL IMAGING PC	1/27/2021	NF-3 Bill Form / HCFA 1500 Form	12/11/2020	73560	\$ 61.10
2899	8672748810000001	ECLIPSE MEDICAL IMAGING PC	1/27/2021	NF-3 Bill Form / HCFA 1500 Form	12/11/2020	72040	\$ 105.90
2900	8672748810000001	ECLIPSE MEDICAL IMAGING PC	1/27/2021	NF-3 Bill Form / HCFA 1500 Form	12/11/2020	73070	\$ 58.04
2901	8672748810000001	ECLIPSE MEDICAL IMAGING PC	1/27/2021	NF-3 Bill Form / HCFA 1500 Form	12/11/2020	73070	\$ 58.04
2902	8672748810000001	ECLIPSE MEDICAL IMAGING PC	1/27/2021	NF-3 Bill Form / HCFA 1500 Form	12/11/2020	73560	\$ 61.10
2903	0286576180101054	ECLIPSE MEDICAL IMAGING PC	1/27/2021	NF-3 Bill Form / HCFA 1500 Form	12/10/2020	72148	\$ 1,003.19
2904	0286576180101054	ECLIPSE MEDICAL IMAGING PC	1/27/2021	NF-3 Bill Form / HCFA 1500 Form	12/10/2020	72141	\$ 725.77
2905	0682269450000001	ECLIPSE MEDICAL IMAGING PC	1/28/2021	NF-3 Bill Form / HCFA 1500 Form	12/10/2020	72141	\$ 967.70
2906	0682269450000001	ECLIPSE MEDICAL IMAGING PC	1/28/2021	NF-3 Bill Form / HCFA 1500 Form	12/10/2020	73218	\$ 631.94
2907	8672748810000001	ECLIPSE MEDICAL IMAGING PC	1/29/2021	NF-3 Bill Form / HCFA 1500 Form	12/11/2020	70551	\$ 961.88
2908	0656108030000001	ECLIPSE MEDICAL IMAGING PC	2/1/2021	NF-3 Bill Form / HCFA 1500 Form	12/18/2020	72148	\$ 1,003.20
2909	0805602800000001	ECLIPSE MEDICAL IMAGING PC	2/1/2021	NF-3 Bill Form / HCFA 1500 Form	12/21/2020	73221	\$ 724.91
2910	0805602800000001	ECLIPSE MEDICAL IMAGING PC	2/1/2021	NF-3 Bill Form / HCFA 1500 Form	12/21/2020	73721	\$ 966.54
2911	0584757070101028	ECLIPSE MEDICAL IMAGING PC	2/1/2021	NF-3 Bill Form / HCFA 1500 Form	12/18/2020	73221	\$ 966.54
2912	0604275380101013	ECLIPSE MEDICAL IMAGING PC	2/1/2021	NF-3 Bill Form / HCFA 1500 Form	12/21/2020	72148	\$ 1,003.20
2913	0604275380101013	ECLIPSE MEDICAL IMAGING PC	2/1/2021	NF-3 Bill Form / HCFA 1500 Form	12/21/2020	72141	\$ 725.77
2914	0656618660000003	ECLIPSE MEDICAL IMAGING PC	2/2/2021	NF-3 Bill Form / HCFA 1500 Form	12/16/2020	73721	\$ 966.54
2915	0514704650000001	ECLIPSE MEDICAL IMAGING PC	2/2/2021	NF-3 Bill Form / HCFA 1500 Form	12/8/2020	73221	\$ 724.90
2916	0514704650000001	ECLIPSE MEDICAL IMAGING PC	2/2/2021	NF-3 Bill Form / HCFA 1500 Form	12/8/2020	73721	\$ 966.54
2917	0636118500101030	ECLIPSE MEDICAL IMAGING PC	2/3/2021	NF-3 Bill Form / HCFA 1500 Form	12/15/2020	72148	\$ 1,003.19
2918	0577379930000001	ECLIPSE MEDICAL IMAGING PC	2/5/2021	NF-3 Bill Form / HCFA 1500 Form	12/16/2020	73110	\$ 58.04
2919	0577379930000001	ECLIPSE MEDICAL IMAGING PC	2/5/2021	NF-3 Bill Form / HCFA 1500 Form	12/16/2020	70551	\$ 961.88
2920	0577379930000001	ECLIPSE MEDICAL IMAGING PC	2/5/2021	NF-3 Bill Form / HCFA 1500 Form	12/16/2020	73030	\$ 78.12
2921	0577379930000001	ECLIPSE MEDICAL IMAGING PC	2/5/2021	NF-3 Bill Form / HCFA 1500 Form	12/16/2020	72040	\$ 79.42
2922	0577379930000001	ECLIPSE MEDICAL IMAGING PC	2/5/2021	NF-3 Bill Form / HCFA 1500 Form	12/16/2020	72100	\$ 72.45
2923	0577379930000001	ECLIPSE MEDICAL IMAGING PC	2/5/2021	NF-3 Bill Form / HCFA 1500 Form	12/16/2020	73030	\$ 78.12
2924	0577379930000001	ECLIPSE MEDICAL IMAGING PC	2/5/2021	NF-3 Bill Form / HCFA 1500 Form	12/16/2020	72070	\$ 76.81
2925	0199598690101213	ECLIPSE MEDICAL IMAGING PC	2/5/2021	NF-3 Bill Form / HCFA 1500 Form	12/14/2020	72148	\$ 1,003.19
2926	0199598690101213	ECLIPSE MEDICAL IMAGING PC	2/5/2021	NF-3 Bill Form / HCFA 1500 Form	12/14/2020	72141	\$ 725.77
2927	0286007100101014	ECLIPSE MEDICAL IMAGING PC	2/8/2021	NF-3 Bill Form / HCFA 1500 Form	12/22/2020	72148	\$ 1,003.20
2928	0659742280000001	ECLIPSE MEDICAL IMAGING PC	2/8/2021	NF-3 Bill Form / HCFA 1500 Form	12/23/2020	73221	\$ 966.54
2929	0530313410101031	ECLIPSE MEDICAL IMAGING PC	2/8/2021	NF-3 Bill Form / HCFA 1500 Form	12/22/2020	72148	\$ 1,003.20
2930	0530313410101031	ECLIPSE MEDICAL IMAGING PC	2/8/2021	NF-3 Bill Form / HCFA 1500 Form	12/22/2020	72141	\$ 725.77
2931	8706994460000001	ECLIPSE MEDICAL IMAGING PC	2/8/2021	NF-3 Bill Form / HCFA 1500 Form	12/28/2020	73721	\$ 966.54
2932	0805602800000001	ECLIPSE MEDICAL IMAGING PC	2/8/2021	NF-3 Bill Form / HCFA 1500 Form	12/24/2020	72148	\$ 1,003.20
2933	0805602800000001	ECLIPSE MEDICAL IMAGING PC	2/8/2021	NF-3 Bill Form / HCFA 1500 Form	12/24/2020	73221	\$ 724.90
2934	0679233010000001	ECLIPSE MEDICAL IMAGING PC	2/10/2021	NF-3 Bill Form / HCFA 1500 Form	12/23/2020	73700	\$ 401.51
2935	0679233010000001	ECLIPSE MEDICAL IMAGING PC	2/10/2021	NF-3 Bill Form / HCFA 1500 Form	12/23/2020	73221	\$ 966.54
2936	0656618660000003	ECLIPSE MEDICAL IMAGING PC	2/10/2021	NF-3 Bill Form / HCFA 1500 Form	12/7/2020	72100	\$ 72.45
2937	0656618660000003	ECLIPSE MEDICAL IMAGING PC	2/10/2021	NF-3 Bill Form / HCFA 1500 Form	12/7/2020	72040	\$ 79.42
2938	0656618660000003	ECLIPSE MEDICAL IMAGING PC	2/10/2021	NF-3 Bill Form / HCFA 1500 Form	12/7/2020	70551	\$ 961.88
2939	0331518060101014	ECLIPSE MEDICAL IMAGING PC	2/12/2021	NF-3 Bill Form / HCFA 1500 Form	12/30/2020	73221	\$ 966.54
2940	0306650410101046	ECLIPSE MEDICAL IMAGING PC	2/12/2021	NF-3 Bill Form / HCFA 1500 Form	12/30/2020	73700	\$ 535.35

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Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
2941	0661612600000001	ECLIPSE MEDICAL IMAGING PC	2/12/2021	NF-3 Bill Form / HCFA 1500 Form	12/30/2020	72148	\$ 1,003.20
2942	0602143340101015	ECLIPSE MEDICAL IMAGING PC	2/12/2021	NF-3 Bill Form / HCFA 1500 Form	12/29/2020	73721	\$ 724.91
2943	0602143340101015	ECLIPSE MEDICAL IMAGING PC	2/12/2021	NF-3 Bill Form / HCFA 1500 Form	12/29/2020	72141	\$ 967.70
2944	0805602800000001	ECLIPSE MEDICAL IMAGING PC	2/12/2021	NF-3 Bill Form / HCFA 1500 Form	12/31/2020	72148	\$ 1,003.20
2945	0805602800000001	ECLIPSE MEDICAL IMAGING PC	2/12/2021	NF-3 Bill Form / HCFA 1500 Form	12/31/2020	72141	\$ 725.77
2946	0656618660000003	ECLIPSE MEDICAL IMAGING PC	2/12/2021	NF-3 Bill Form / HCFA 1500 Form	12/29/2020	72148	\$ 1,003.20
2947	0656618660000003	ECLIPSE MEDICAL IMAGING PC	2/12/2021	NF-3 Bill Form / HCFA 1500 Form	12/29/2020	73221	\$ 724.91
2948	0318042610101016	ECLIPSE MEDICAL IMAGING PC	2/15/2021	NF-3 Bill Form / HCFA 1500 Form	12/16/2020	72141	\$ 967.70
2949	0353695550101076	ECLIPSE MEDICAL IMAGING PC	2/16/2021	NF-3 Bill Form / HCFA 1500 Form	1/4/2021	73721	\$ 966.54
2950	0659742280000001	ECLIPSE MEDICAL IMAGING PC	2/16/2021	NF-3 Bill Form / HCFA 1500 Form	1/4/2021	72141	\$ 967.70
2951	0564114070000001	ECLIPSE MEDICAL IMAGING PC	2/16/2021	NF-3 Bill Form / HCFA 1500 Form	1/4/2021	73721	\$ 966.54
2952	0577379930000001	ECLIPSE MEDICAL IMAGING PC	2/16/2021	NF-3 Bill Form / HCFA 1500 Form	1/5/2021	73221	\$ 966.54
2953	0577379930000001	ECLIPSE MEDICAL IMAGING PC	2/16/2021	NF-3 Bill Form / HCFA 1500 Form	1/5/2021	73721	\$ 724.91
2954	0805602800000001	ECLIPSE MEDICAL IMAGING PC	2/16/2021	NF-3 Bill Form / HCFA 1500 Form	1/4/2021	72141	\$ 967.70
2955	0680545890000001	ECLIPSE MEDICAL IMAGING PC	11/23/2020	NF-3 Bill Form / HCFA 1500 Form	10/6/2020	73721	\$ 659.00
2956	0680545890000001	ECLIPSE MEDICAL IMAGING PC	11/23/2020	NF-3 Bill Form / HCFA 1500 Form	10/6/2020	72141	\$ 879.73
2957	0311561830101072	ECLIPSE MEDICAL IMAGING PC	11/29/2018	NF-3 Bill Form / HCFA 1500 Form	9/23/2018	72141	\$ 879.73
2958	0311561830101072	ECLIPSE MEDICAL IMAGING PC	11/12/2018	NF-3 Bill Form / HCFA 1500 Form	9/23/2018	73221	\$ 878.67
2959	0311561830101072	ECLIPSE MEDICAL IMAGING PC	11/26/2018	NF-3 Bill Form / HCFA 1500 Form	10/2/2018	72148	\$ 912.00
2960	0311561830101072	ECLIPSE MEDICAL IMAGING PC	11/26/2018	NF-3 Bill Form / HCFA 1500 Form	10/2/2018	72141	\$ 659.79
2961	0311561830101072	ECLIPSE MEDICAL IMAGING PC	11/26/2018	NF-3 Bill Form / HCFA 1500 Form	9/30/2018	73721	\$ 878.67
2962	0311561830101072	ECLIPSE MEDICAL IMAGING PC	12/3/2018	NF-3 Bill Form / HCFA 1500 Form	9/30/2018	72148	\$ 912.00
2963	0658114030000001	ECLIPSE MEDICAL IMAGING PC	10/28/2019	NF-3 Bill Form / HCFA 1500 Form	9/11/2019	73721	\$ 878.67
2964	0649031090101018	ECLIPSE MEDICAL IMAGING PC	5/19/2020	NF-3 Bill Form / HCFA 1500 Form	2/17/2020	72148	\$ 912.00
2965	0649031090101018	ECLIPSE MEDICAL IMAGING PC	5/19/2020	NF-3 Bill Form / HCFA 1500 Form	2/17/2020	72141	\$ 659.79
2966	0649031090101018	ECLIPSE MEDICAL IMAGING PC	6/1/2020	NF-3 Bill Form / HCFA 1500 Form	2/26/2020	72146	\$ 959.61
2967	0451500360101046	ECLIPSE MEDICAL IMAGING PC	6/22/2020	NF-3 Bill Form / HCFA 1500 Form	5/7/2020	70551	\$ 874.44
2968	0352983330000001	ECLIPSE MEDICAL IMAGING PC	6/22/2020	NF-3 Bill Form / HCFA 1500 Form	3/17/2020	72146	\$ 959.61
2969	0451500360101046	ECLIPSE MEDICAL IMAGING PC	6/26/2020	NF-3 Bill Form / HCFA 1500 Form	5/7/2020	70551	\$ 874.44
2970	0451500360101046	ECLIPSE MEDICAL IMAGING PC	6/26/2020	NF-3 Bill Form / HCFA 1500 Form	5/14/2020	73221	\$ 878.67
2971	0451500360101046	ECLIPSE MEDICAL IMAGING PC	6/26/2020	NF-3 Bill Form / HCFA 1500 Form	5/12/2020	73221	\$ 878.67
2972	0451500360101046	ECLIPSE MEDICAL IMAGING PC	6/26/2020	NF-3 Bill Form / HCFA 1500 Form	5/14/2020	73721	\$ 878.67
2973	0451500360101046	ECLIPSE MEDICAL IMAGING PC	7/2/2020	NF-3 Bill Form / HCFA 1500 Form	5/18/2020	72141	\$ 879.73
2974	0451500360101046	ECLIPSE MEDICAL IMAGING PC	7/2/2020	NF-3 Bill Form / HCFA 1500 Form	5/18/2020	73221	\$ 878.67
2975	0451500360101046	ECLIPSE MEDICAL IMAGING PC	7/6/2020	NF-3 Bill Form / HCFA 1500 Form	5/20/2020	73221	\$ 878.67
2976	0451500360101046	ECLIPSE MEDICAL IMAGING PC	7/6/2020	NF-3 Bill Form / HCFA 1500 Form	5/20/2020	70551	\$ 655.83
2977	0451500360101046	ECLIPSE MEDICAL IMAGING PC	7/6/2020	NF-3 Bill Form / HCFA 1500 Form	5/22/2020	73221	\$ 878.67
2978	0451500360101046	ECLIPSE MEDICAL IMAGING PC	7/13/2020	NF-3 Bill Form / HCFA 1500 Form	5/26/2020	72141	\$ 659.79
2979	0451500360101046	ECLIPSE MEDICAL IMAGING PC	7/13/2020	NF-3 Bill Form / HCFA 1500 Form	5/26/2020	72148	\$ 912.00
2980	0451500360101046	ECLIPSE MEDICAL IMAGING PC	8/7/2020	NF-3 Bill Form / HCFA 1500 Form	6/23/2020	72141	\$ 879.73
2981	0359489900101068	ECLIPSE MEDICAL IMAGING PC	3/10/2020	NF-3 Bill Form / HCFA 1500 Form	1/24/2020	72141	\$ 659.79
2982	0359489900101068	ECLIPSE MEDICAL IMAGING PC	3/10/2020	NF-3 Bill Form / HCFA 1500 Form	1/24/2020	72148	\$ 912.00
2983	0661797880101011	ECLIPSE MEDICAL IMAGING PC	5/19/2020	NF-3 Bill Form / HCFA 1500 Form	2/18/2020	72148	\$ 912.00
2984	0661797880101011	ECLIPSE MEDICAL IMAGING PC	5/19/2020	NF-3 Bill Form / HCFA 1500 Form	2/18/2020	72141	\$ 659.79
2985	0372077410101017	ECLIPSE MEDICAL IMAGING PC	6/1/2020	NF-3 Bill Form / HCFA 1500 Form	2/24/2020	71046	\$ 78.29
2986	0548116820101049	ECLIPSE MEDICAL IMAGING PC	6/1/2020	NF-3 Bill Form / HCFA 1500 Form	2/26/2020	72148	\$ 912.00
2987	0626235760101029	ECLIPSE MEDICAL IMAGING PC	6/1/2020	NF-3 Bill Form / HCFA 1500 Form	2/27/2020	72148	\$ 912.00
2988	0626235760101029	ECLIPSE MEDICAL IMAGING PC	6/1/2020	NF-3 Bill Form / HCFA 1500 Form	2/27/2020	70551	\$ 655.83
2989	0626235760101029	ECLIPSE MEDICAL IMAGING PC	6/2/2020	NF-3 Bill Form / HCFA 1500 Form	3/2/2020	72141	\$ 879.73
2990	0670675830000001	ECLIPSE MEDICAL IMAGING PC	7/6/2020	NF-3 Bill Form / HCFA 1500 Form	5/25/2020	72141	\$ 879.73
2991	0253136110101175	ECLIPSE MEDICAL IMAGING PC	7/13/2020	NF-3 Bill Form / HCFA 1500 Form	5/28/2020	72148	\$ 912.00
2992	0582991220000002	ECLIPSE MEDICAL IMAGING PC	7/14/2020	NF-3 Bill Form / HCFA 1500 Form	5/29/2020	73721	\$ 878.67
2993	0614274740101019	ECLIPSE MEDICAL IMAGING PC	7/14/2020	NF-3 Bill Form / HCFA 1500 Form	5/27/2020	73221	\$ 878.67
2994	0614274740101019	ECLIPSE MEDICAL IMAGING PC	7/14/2020	NF-3 Bill Form / HCFA 1500 Form	5/27/2020	73721	\$ 659.00
2995	0614274740101019	ECLIPSE MEDICAL IMAGING PC	7/14/2020	NF-3 Bill Form / HCFA 1500 Form	5/29/2020	73721	\$ 878.67
2996	0614274740101019	ECLIPSE MEDICAL IMAGING PC	7/14/2020	NF-3 Bill Form / HCFA 1500 Form	5/29/2020	73221	\$ 659.00
2997	0670675830000001	ECLIPSE MEDICAL IMAGING PC	7/14/2020	NF-3 Bill Form / HCFA 1500 Form	5/29/2020	72148	\$ 912.00
2998	0614274740101019	ECLIPSE MEDICAL IMAGING PC	7/17/2020	NF-3 Bill Form / HCFA 1500 Form	6/1/2020	72141	\$ 659.79
2999	0614274740101019	ECLIPSE MEDICAL IMAGING PC	7/17/2020	NF-3 Bill Form / HCFA 1500 Form	6/1/2020	72148	\$ 912.00
3000	0471119400101168	ECLIPSE MEDICAL IMAGING PC	7/27/2020	NF-3 Bill Form / HCFA 1500 Form	6/9/2020	70551	\$ 874.44
3001	0590688090000003	ECLIPSE MEDICAL IMAGING PC	8/3/2020	NF-3 Bill Form / HCFA 1500 Form	6/22/2020	73721	\$ 878.67
3002	0590688090000003	ECLIPSE MEDICAL IMAGING PC	8/3/2020	NF-3 Bill Form / HCFA 1500 Form	6/22/2020	70551	\$ 655.83
3003	0471119400101168	ECLIPSE MEDICAL IMAGING PC	8/3/2020	NF-3 Bill Form / HCFA 1500 Form	6/18/2020	73221	\$ 659.00
3004	0471119400101168	ECLIPSE MEDICAL IMAGING PC	8/3/2020	NF-3 Bill Form / HCFA 1500 Form	6/18/2020	73721	\$ 878.67
3005	0460998820101011	ECLIPSE MEDICAL IMAGING PC	8/10/2020	NF-3 Bill Form / HCFA 1500 Form	6/24/2020	72070	\$ 69.82
3006	0460998820101011	ECLIPSE MEDICAL IMAGING PC	8/10/2020	NF-3 Bill Form / HCFA 1500 Form	6/24/2020	72100	\$ 65.86
3007	0460998820101011	ECLIPSE MEDICAL IMAGING PC	8/10/2020	NF-3 Bill Form / HCFA 1500 Form	6/24/2020	72040	\$ 96.27
3008	0460998820101011	ECLIPSE MEDICAL IMAGING PC	8/10/2020	NF-3 Bill Form / HCFA 1500 Form	6/24/2020	73030	\$ 71.02
3009	0471119400101168	ECLIPSE MEDICAL IMAGING PC	8/10/2020	NF-3 Bill Form / HCFA 1500 Form	6/24/2020	73221	\$ 878.67
3010	0460998820101011	ECLIPSE MEDICAL IMAGING PC	8/10/2020	NF-3 Bill Form / HCFA 1500 Form	6/24/2020	72040	\$ 96.27

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Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
3011	0460998820101011	ECLIPSE MEDICAL IMAGING PC	8/10/2020	NF-3 Bill Form / HCFA 1500 Form	6/24/2020	73510	\$ 62.68
3012	0460998820101011	ECLIPSE MEDICAL IMAGING PC	8/10/2020	NF-3 Bill Form / HCFA 1500 Form	6/24/2020	72100	\$ 65.86
3013	0460998820101011	ECLIPSE MEDICAL IMAGING PC	8/10/2020	NF-3 Bill Form / HCFA 1500 Form	6/24/2020	72070	\$ 69.82
3014	0433864820101019	ECLIPSE MEDICAL IMAGING PC	8/14/2020	NF-3 Bill Form / HCFA 1500 Form	6/29/2020	73221	\$ 878.67
3015	0433864820101019	ECLIPSE MEDICAL IMAGING PC	8/14/2020	NF-3 Bill Form / HCFA 1500 Form	6/29/2020	73700	\$ 486.68
3016	0543473080101030	ECLIPSE MEDICAL IMAGING PC	8/17/2020	NF-3 Bill Form / HCFA 1500 Form	7/3/2020	73221	\$ 878.67
3017	0471119400101168	ECLIPSE MEDICAL IMAGING PC	8/3/2020	NF-3 Bill Form / HCFA 1500 Form	6/22/2020	73721	\$ 878.67
3018	0471119400101168	ECLIPSE MEDICAL IMAGING PC	8/3/2020	NF-3 Bill Form / HCFA 1500 Form	6/22/2020	73218	\$ 574.49
3019	0433864820101019	ECLIPSE MEDICAL IMAGING PC	8/21/2020	NF-3 Bill Form / HCFA 1500 Form	7/6/2020	72141	\$ 659.79
3020	0433864820101019	ECLIPSE MEDICAL IMAGING PC	8/21/2020	NF-3 Bill Form / HCFA 1500 Form	7/6/2020	72148	\$ 912.00
3021	0471119400101168	ECLIPSE MEDICAL IMAGING PC	8/21/2020	NF-3 Bill Form / HCFA 1500 Form	7/6/2020	72141	\$ 659.79
3022	0471119400101168	ECLIPSE MEDICAL IMAGING PC	8/21/2020	NF-3 Bill Form / HCFA 1500 Form	7/6/2020	72148	\$ 912.00
3023	0590688090000003	ECLIPSE MEDICAL IMAGING PC	8/21/2020	NF-3 Bill Form / HCFA 1500 Form	7/6/2020	73718	\$ 901.42
3024	0590688090000003	ECLIPSE MEDICAL IMAGING PC	8/21/2020	NF-3 Bill Form / HCFA 1500 Form	7/6/2020	73721	\$ 659.00
3025	0433864820101019	ECLIPSE MEDICAL IMAGING PC	8/24/2020	NF-3 Bill Form / HCFA 1500 Form	7/8/2020	73200	\$ 486.68
3026	0433864820101019	ECLIPSE MEDICAL IMAGING PC	8/24/2020	NF-3 Bill Form / HCFA 1500 Form	7/8/2020	72141	\$ 879.73
3027	0433864820101019	ECLIPSE MEDICAL IMAGING PC	9/8/2020	NF-3 Bill Form / HCFA 1500 Form	7/23/2020	72148	\$ 912.00
3028	0112335310101776	ECLIPSE MEDICAL IMAGING PC	9/8/2020	NF-3 Bill Form / HCFA 1500 Form	7/22/2020	72141	\$ 879.73
3029	0112335310101776	ECLIPSE MEDICAL IMAGING PC	9/8/2020	NF-3 Bill Form / HCFA 1500 Form	7/22/2020	73721	\$ 659.00
3030	0433864820101019	ECLIPSE MEDICAL IMAGING PC	9/8/2020	NF-3 Bill Form / HCFA 1500 Form	7/23/2020	72125	\$ 581.90
3031	0112335310101776	ECLIPSE MEDICAL IMAGING PC	9/14/2020	NF-3 Bill Form / HCFA 1500 Form	7/30/2020	72148	\$ 912.00
3032	0433864820101019	ECLIPSE MEDICAL IMAGING PC	9/18/2020	NF-3 Bill Form / HCFA 1500 Form	8/3/2020	72131	\$ 581.90
3033	0471119400101168	ECLIPSE MEDICAL IMAGING PC	10/9/2020	NF-3 Bill Form / HCFA 1500 Form	8/25/2020	73221	\$ 878.67
3034	0606587560000001	ECLIPSE MEDICAL IMAGING PC	11/20/2020	NF-3 Bill Form / HCFA 1500 Form	10/6/2020	73221	\$ 659.00
3035	0606587560000001	ECLIPSE MEDICAL IMAGING PC	11/20/2020	NF-3 Bill Form / HCFA 1500 Form	10/6/2020	73721	\$ 878.67
3036	0606587560000001	ECLIPSE MEDICAL IMAGING PC	11/23/2020	NF-3 Bill Form / HCFA 1500 Form	10/7/2020	72070	\$ 69.82
3037	0606587560000001	ECLIPSE MEDICAL IMAGING PC	11/23/2020	NF-3 Bill Form / HCFA 1500 Form	10/7/2020	72040	\$ 96.27
3038	0606587560000001	ECLIPSE MEDICAL IMAGING PC	11/23/2020	NF-3 Bill Form / HCFA 1500 Form	10/7/2020	72100	\$ 65.86
3039	0606587560000001	ECLIPSE MEDICAL IMAGING PC	12/11/2020	NF-3 Bill Form / HCFA 1500 Form	10/6/2020	73221	\$ 659.00
3040	0606587560000001	ECLIPSE MEDICAL IMAGING PC	12/11/2020	NF-3 Bill Form / HCFA 1500 Form	10/6/2020	73721	\$ 878.67
3041	0606587560000001	ECLIPSE MEDICAL IMAGING PC	12/11/2020	NF-3 Bill Form / HCFA 1500 Form	10/7/2020	72070	\$ 69.82
3042	0606587560000001	ECLIPSE MEDICAL IMAGING PC	12/11/2020	NF-3 Bill Form / HCFA 1500 Form	10/7/2020	72040	\$ 96.27
3043	0606587560000001	ECLIPSE MEDICAL IMAGING PC	12/11/2020	NF-3 Bill Form / HCFA 1500 Form	10/7/2020	72100	\$ 65.86
3044	0606587560000001	ECLIPSE MEDICAL IMAGING PC	12/11/2020	NF-3 Bill Form / HCFA 1500 Form	10/28/2020	72148	\$ 1,003.19
3045	0606587560000001	ECLIPSE MEDICAL IMAGING PC	12/14/2020	NF-3 Bill Form / HCFA 1500 Form	10/28/2020	72148	\$ 1,003.19
3046	0539766540000001	ECLIPSE MEDICAL IMAGING PC	1/4/2021	NF-3 Bill Form / HCFA 1500 Form	11/23/2020	72148	\$ 1,003.19
3047	0652836520000004	ECLIPSE MEDICAL IMAGING PC	12/11/2021	NF-3 Bill Form / HCFA 1500 Form	11/24/2020	73221	\$ 966.54
3048	0652836520000004	ECLIPSE MEDICAL IMAGING PC	1/19/2021	NF-3 Bill Form / HCFA 1500 Form	12/1/2020	72148	\$ 1,003.19
3049	0652836520000004	ECLIPSE MEDICAL IMAGING PC	2/4/2021	NF-3 Bill Form / HCFA 1500 Form	12/9/2020	73221	\$ 966.54
3050	0652836520000004	ECLIPSE MEDICAL IMAGING PC	2/8/2021	NF-3 Bill Form / HCFA 1500 Form	12/28/2020	72141	\$ 967.70
3051	0802632450108022	ECLIPSE MEDICAL IMAGING PC	8/28/2017	NF-3 Bill Form / HCFA 1500 Form	7/14/2017	73721	\$ 878.67
3052	0802632450108022	ECLIPSE MEDICAL IMAGING PC	9/11/2017	NF-3 Bill Form / HCFA 1500 Form	7/31/2017	72141	\$ 659.79
3053	0802632450108022	ECLIPSE MEDICAL IMAGING PC	9/11/2017	NF-3 Bill Form / HCFA 1500 Form	7/31/2017	72148	\$ 912.00
3054	0803153060108020	ECLIPSE MEDICAL IMAGING PC	9/25/2017	NF-3 Bill Form / HCFA 1500 Form	8/11/2017	73721	\$ 878.67
3055	0803153060108020	ECLIPSE MEDICAL IMAGING PC	10/11/2017	NF-3 Bill Form / HCFA 1500 Form	8/28/2017	72148	\$ 912.00
3056	0803153060108020	ECLIPSE MEDICAL IMAGING PC	10/11/2017	NF-3 Bill Form / HCFA 1500 Form	8/28/2017	72141	\$ 659.79
3057	0803153060108020	ECLIPSE MEDICAL IMAGING PC	11/6/2017	NF-3 Bill Form / HCFA 1500 Form	9/19/2017	73221	\$ 878.67
3058	0803006900108016	ECLIPSE MEDICAL IMAGING PC	3/5/2018	NF-3 Bill Form / HCFA 1500 Form	12/21/2017	73221	\$ 878.67
3059	0803006900108016	ECLIPSE MEDICAL IMAGING PC	3/5/2018	NF-3 Bill Form / HCFA 1500 Form	12/21/2017	73721	\$ 659.00
3060	0803006900108016	ECLIPSE MEDICAL IMAGING PC	3/5/2018	NF-3 Bill Form / HCFA 1500 Form	12/27/2017	72141	\$ 659.79
3061	0803006900108016	ECLIPSE MEDICAL IMAGING PC	3/5/2018	NF-3 Bill Form / HCFA 1500 Form	12/27/2017	72148	\$ 912.00
3062	0803006900108016	ECLIPSE MEDICAL IMAGING PC	3/5/2018	NF-3 Bill Form / HCFA 1500 Form	1/9/2018	73510	\$ 62.68
3063	0803006900108016	ECLIPSE MEDICAL IMAGING PC	3/5/2018	NF-3 Bill Form / HCFA 1500 Form	1/9/2018	72070	\$ 93.10
3064	0803006900108016	ECLIPSE MEDICAL IMAGING PC	3/5/2018	NF-3 Bill Form / HCFA 1500 Form	1/9/2018	72170	\$ 76.71
3065	0803006900108016	ECLIPSE MEDICAL IMAGING PC	9/20/2018	NF-3 Bill Form / HCFA 1500 Form	12/29/2017	72070	\$ 69.82
3066	0803006900108016	ECLIPSE MEDICAL IMAGING PC	9/20/2018	NF-3 Bill Form / HCFA 1500 Form	12/29/2017	72141	\$ 659.79
3067	0803006900108016	ECLIPSE MEDICAL IMAGING PC	9/20/2018	NF-3 Bill Form / HCFA 1500 Form	12/29/2017	72148	\$ 912.00
3068	0803006900108016	ECLIPSE MEDICAL IMAGING PC	9/20/2018	NF-3 Bill Form / HCFA 1500 Form	12/29/2017	73030	\$ 71.02
3069	0803006900108016	ECLIPSE MEDICAL IMAGING PC	9/20/2018	NF-3 Bill Form / HCFA 1500 Form	12/29/2017	72170	\$ 57.54
3070	0803006900108016	ECLIPSE MEDICAL IMAGING PC	9/20/2018	NF-3 Bill Form / HCFA 1500 Form	12/29/2017	73510	\$ 62.68
3071	0803006900108016	ECLIPSE MEDICAL IMAGING PC	9/20/2018	NF-3 Bill Form / HCFA 1500 Form	12/20/2017	73221	\$ 878.67
3072	0803006900108016	ECLIPSE MEDICAL IMAGING PC	9/20/2018	NF-3 Bill Form / HCFA 1500 Form	12/20/2017	73221	\$ 659.00
3073	0803006900108016	ECLIPSE MEDICAL IMAGING PC	9/20/2018	NF-3 Bill Form / HCFA 1500 Form	12/29/2017	72070	\$ 69.82
3074	0803006900108016	ECLIPSE MEDICAL IMAGING PC	9/20/2018	NF-3 Bill Form / HCFA 1500 Form	12/29/2017	72141	\$ 659.79
3075	0803006900108016	ECLIPSE MEDICAL IMAGING PC	9/20/2018	NF-3 Bill Form / HCFA 1500 Form	12/29/2017	72148	\$ 912.00
3076	0803006900108016	ECLIPSE MEDICAL IMAGING PC	9/20/2018	NF-3 Bill Form / HCFA 1500 Form	12/29/2017	73030	\$ 71.02
3077	0803006900108016	ECLIPSE MEDICAL IMAGING PC	9/20/2018	NF-3 Bill Form / HCFA 1500 Form	12/29/2017	72170	\$ 57.54
3078	0803006900108016	ECLIPSE MEDICAL IMAGING PC	9/20/2018	NF-3 Bill Form / HCFA 1500 Form	12/29/2017	73510	\$ 62.68
3079	0804386910108027	ECLIPSE MEDICAL IMAGING PC	10/26/2018	NF-3 Bill Form / HCFA 1500 Form	9/12/2018	73221	\$ 878.67
3080	0804386910108027	ECLIPSE MEDICAL IMAGING PC	10/25/2018	NF-3 Bill Form / HCFA 1500 Form	9/10/2018	73721	\$ 659.00

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Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
3081	0804386910108027	ECLIPSE MEDICAL IMAGING PC	10/25/2018	NF-3 Bill Form / HCFA 1500 Form	9/10/2018	73221	\$ 878.67
3082	0804386910108027	ECLIPSE MEDICAL IMAGING PC	10/26/2018	NF-3 Bill Form / HCFA 1500 Form	9/12/2018	73221	\$ 878.67
3083	0804386910108027	ECLIPSE MEDICAL IMAGING PC	10/25/2018	NF-3 Bill Form / HCFA 1500 Form	9/10/2018	73721	\$ 659.00
3084	0804386910108027	ECLIPSE MEDICAL IMAGING PC	10/25/2018	NF-3 Bill Form / HCFA 1500 Form	9/10/2018	73221	\$ 878.67
3085	0803351980108027	ECLIPSE MEDICAL IMAGING PC	10/9/2018	NF-3 Bill Form / HCFA 1500 Form	8/30/2018	73721	\$ 878.67
3086	0803351980108027	ECLIPSE MEDICAL IMAGING PC	10/9/2018	NF-3 Bill Form / HCFA 1500 Form	8/30/2018	73721	\$ 878.67
3087	0804386910108027	ECLIPSE MEDICAL IMAGING PC	11/19/2018	NF-3 Bill Form / HCFA 1500 Form	10/7/2018	72148	\$ 912.00
3088	0804386910108027	ECLIPSE MEDICAL IMAGING PC	11/19/2018	NF-3 Bill Form / HCFA 1500 Form	10/7/2018	72148	\$ 912.00
3089	0803351980108027	ECLIPSE MEDICAL IMAGING PC	11/16/2018	NF-3 Bill Form / HCFA 1500 Form	10/2/2018	72148	\$ 912.00
3090	0803351980108027	ECLIPSE MEDICAL IMAGING PC	11/5/2018	NF-3 Bill Form / HCFA 1500 Form	9/23/2018	73721	\$ 878.67
3091	0803351980108027	ECLIPSE MEDICAL IMAGING PC	11/5/2018	NF-3 Bill Form / HCFA 1500 Form	9/23/2018	73721	\$ 878.67
3092	0552214890101016	ECLIPSE MEDICAL IMAGING PC	2/27/2017	NF-3 Bill Form / HCFA 1500 Form	1/16/2017	72148	\$ 912.00
3093	0570187560101011	ECLIPSE MEDICAL IMAGING PC	2/27/2017	NF-3 Bill Form / HCFA 1500 Form	1/15/2017	72148	\$ 912.00
3094	0568707290101017	ECLIPSE MEDICAL IMAGING PC	2/27/2017	NF-3 Bill Form / HCFA 1500 Form	1/15/2017	72148	\$ 912.00
3095	0444207550101070	ECLIPSE MEDICAL IMAGING PC	2/27/2017	NF-3 Bill Form / HCFA 1500 Form	1/15/2017	72141	\$ 879.73
3096	0483794310101021	ECLIPSE MEDICAL IMAGING PC	2/27/2017	NF-3 Bill Form / HCFA 1500 Form	1/16/2017	72141	\$ 879.73
3097	0316102630101056	ECLIPSE MEDICAL IMAGING PC	2/27/2017	NF-3 Bill Form / HCFA 1500 Form	1/16/2017	72040	\$ 96.27
3098	0316102630101056	ECLIPSE MEDICAL IMAGING PC	2/27/2017	NF-3 Bill Form / HCFA 1500 Form	1/16/2017	72070	\$ 69.82
3099	0316102630101056	ECLIPSE MEDICAL IMAGING PC	2/27/2017	NF-3 Bill Form / HCFA 1500 Form	1/16/2017	72100	\$ 65.86
3100	0539766170101014	ECLIPSE MEDICAL IMAGING PC	3/3/2017	NF-3 Bill Form / HCFA 1500 Form	1/17/2017	72141	\$ 879.73
3101	0302158130101026	ECLIPSE MEDICAL IMAGING PC	3/3/2017	NF-3 Bill Form / HCFA 1500 Form	1/17/2017	72141	\$ 879.73
3102	0330610040101021	ECLIPSE MEDICAL IMAGING PC	3/3/2017	NF-3 Bill Form / HCFA 1500 Form	1/17/2017	72148	\$ 912.00
3103	0302158130101026	ECLIPSE MEDICAL IMAGING PC	3/3/2017	NF-3 Bill Form / HCFA 1500 Form	1/17/2017	72148	\$ 912.00
3104	0302158130101026	ECLIPSE MEDICAL IMAGING PC	3/3/2017	NF-3 Bill Form / HCFA 1500 Form	1/17/2017	72070	\$ 69.82
3105	0490971120101042	ECLIPSE MEDICAL IMAGING PC	3/6/2017	NF-3 Bill Form / HCFA 1500 Form	1/19/2017	72141	\$ 659.79
3106	0490971120101042	ECLIPSE MEDICAL IMAGING PC	3/6/2017	NF-3 Bill Form / HCFA 1500 Form	1/19/2017	72148	\$ 912.00
3107	0559986380101019	ECLIPSE MEDICAL IMAGING PC	3/6/2017	NF-3 Bill Form / HCFA 1500 Form	1/20/2017	72148	\$ 912.00
3108	0414604430101013	ECLIPSE MEDICAL IMAGING PC	3/6/2017	NF-3 Bill Form / HCFA 1500 Form	1/20/2017	72141	\$ 879.73
3109	0362759300101048	ECLIPSE MEDICAL IMAGING PC	3/6/2017	NF-3 Bill Form / HCFA 1500 Form	1/22/2017	72148	\$ 912.00
3110	0356012480101059	ECLIPSE MEDICAL IMAGING PC	3/6/2017	NF-3 Bill Form / HCFA 1500 Form	1/18/2017	72141	\$ 879.73
3111	0100145650101043	ECLIPSE MEDICAL IMAGING PC	3/6/2017	NF-3 Bill Form / HCFA 1500 Form	1/18/2017	73221	\$ 659.00
3112	0100145650101043	ECLIPSE MEDICAL IMAGING PC	3/6/2017	NF-3 Bill Form / HCFA 1500 Form	1/18/2017	73721	\$ 878.67
3113	0105526330101224	ECLIPSE MEDICAL IMAGING PC	3/6/2017	NF-3 Bill Form / HCFA 1500 Form	1/19/2017	73221	\$ 878.67
3114	0549352370101019	ECLIPSE MEDICAL IMAGING PC	3/6/2017	NF-3 Bill Form / HCFA 1500 Form	1/19/2017	73221	\$ 878.67
3115	0549352370101019	ECLIPSE MEDICAL IMAGING PC	3/6/2017	NF-3 Bill Form / HCFA 1500 Form	1/19/2017	73221	\$ 659.00
3116	0568707290101017	ECLIPSE MEDICAL IMAGING PC	3/6/2017	NF-3 Bill Form / HCFA 1500 Form	1/18/2017	72148	\$ 912.00
3117	0568707290101017	ECLIPSE MEDICAL IMAGING PC	3/6/2017	NF-3 Bill Form / HCFA 1500 Form	1/18/2017	72141	\$ 659.79
3118	0292731560101021	ECLIPSE MEDICAL IMAGING PC	3/6/2017	NF-3 Bill Form / HCFA 1500 Form	1/20/2017	72148	\$ 912.00
3119	0536227170101028	ECLIPSE MEDICAL IMAGING PC	3/6/2017	NF-3 Bill Form / HCFA 1500 Form	1/22/2017	73221	\$ 878.67
3120	0583089410101016	ECLIPSE MEDICAL IMAGING PC	3/6/2017	NF-3 Bill Form / HCFA 1500 Form	1/20/2017	73221	\$ 878.67
3121	0302158130101026	ECLIPSE MEDICAL IMAGING PC	3/6/2017	NF-3 Bill Form / HCFA 1500 Form	1/20/2017	72141	\$ 879.73
3122	0100145650101043	ECLIPSE MEDICAL IMAGING PC	3/6/2017	NF-3 Bill Form / HCFA 1500 Form	1/20/2017	73721	\$ 878.67
3123	0100145650101043	ECLIPSE MEDICAL IMAGING PC	3/6/2017	NF-3 Bill Form / HCFA 1500 Form	1/20/2017	73221	\$ 659.00
3124	0501849930101054	ECLIPSE MEDICAL IMAGING PC	3/6/2017	NF-3 Bill Form / HCFA 1500 Form	1/20/2017	73221	\$ 878.67
3125	0414850920101068	ECLIPSE MEDICAL IMAGING PC	3/6/2017	NF-3 Bill Form / HCFA 1500 Form	1/22/2017	72148	\$ 912.00
3126	0414850920101068	ECLIPSE MEDICAL IMAGING PC	3/6/2017	NF-3 Bill Form / HCFA 1500 Form	1/22/2017	72141	\$ 659.79
3127	0583089410101016	ECLIPSE MEDICAL IMAGING PC	3/7/2017	NF-3 Bill Form / HCFA 1500 Form	1/20/2017	73221	\$ 878.67
3128	0451170690101048	ECLIPSE MEDICAL IMAGING PC	3/9/2017	NF-3 Bill Form / HCFA 1500 Form	1/20/2017	72070	\$ 69.82
3129	0451170690101048	ECLIPSE MEDICAL IMAGING PC	3/9/2017	NF-3 Bill Form / HCFA 1500 Form	1/20/2017	72141	\$ 879.73
3130	0451170690101048	ECLIPSE MEDICAL IMAGING PC	3/9/2017	NF-3 Bill Form / HCFA 1500 Form	1/20/2017	72100	\$ 65.86
3131	0451170690101048	ECLIPSE MEDICAL IMAGING PC	3/9/2017	NF-3 Bill Form / HCFA 1500 Form	1/20/2017	72040	\$ 72.20
3132	0451170690101048	ECLIPSE MEDICAL IMAGING PC	3/9/2017	NF-3 Bill Form / HCFA 1500 Form	1/20/2017	73721	\$ 659.00
3133	0441063760101035	ECLIPSE MEDICAL IMAGING PC	3/9/2017	NF-3 Bill Form / HCFA 1500 Form	1/24/2017	73721	\$ 878.67
3134	0483794310101021	ECLIPSE MEDICAL IMAGING PC	3/9/2017	NF-3 Bill Form / HCFA 1500 Form	1/23/2017	70450	\$ 341.60
3135	0483794310101021	ECLIPSE MEDICAL IMAGING PC	3/9/2017	NF-3 Bill Form / HCFA 1500 Form	1/23/2017	72148	\$ 912.00
3136	0554219990101012	ECLIPSE MEDICAL IMAGING PC	3/9/2017	NF-3 Bill Form / HCFA 1500 Form	1/23/2017	73221	\$ 878.67
3137	0464090210101010	ECLIPSE MEDICAL IMAGING PC	3/9/2017	NF-3 Bill Form / HCFA 1500 Form	1/24/2017	72148	\$ 912.00
3138	0464090210101010	ECLIPSE MEDICAL IMAGING PC	3/9/2017	NF-3 Bill Form / HCFA 1500 Form	1/24/2017	72141	\$ 659.79
3139	0578309630101019	ECLIPSE MEDICAL IMAGING PC	3/9/2017	NF-3 Bill Form / HCFA 1500 Form	1/23/2017	72141	\$ 659.79
3140	0578309630101019	ECLIPSE MEDICAL IMAGING PC	3/9/2017	NF-3 Bill Form / HCFA 1500 Form	1/23/2017	72148	\$ 912.00
3141	0566023940101015	ECLIPSE MEDICAL IMAGING PC	3/9/2017	NF-3 Bill Form / HCFA 1500 Form	1/23/2017	73221	\$ 878.67
3142	0491379650101052	ECLIPSE MEDICAL IMAGING PC	3/13/2017	NF-3 Bill Form / HCFA 1500 Form	1/25/2017	73721	\$ 659.00
3143	0491379650101052	ECLIPSE MEDICAL IMAGING PC	3/13/2017	NF-3 Bill Form / HCFA 1500 Form	1/25/2017	73221	\$ 878.67
3144	0414604430101013	ECLIPSE MEDICAL IMAGING PC	3/13/2017	NF-3 Bill Form / HCFA 1500 Form	1/25/2017	72148	\$ 912.00
3145	0100145650101043	ECLIPSE MEDICAL IMAGING PC	3/13/2017	NF-3 Bill Form / HCFA 1500 Form	1/25/2017	72141	\$ 659.79
3146	0100145650101043	ECLIPSE MEDICAL IMAGING PC	3/13/2017	NF-3 Bill Form / HCFA 1500 Form	1/25/2017	72148	\$ 912.00
3147	0441063760101035	ECLIPSE MEDICAL IMAGING PC	3/13/2017	NF-3 Bill Form / HCFA 1500 Form	1/29/2017	72141	\$ 879.73
3148	0347543410101035	ECLIPSE MEDICAL IMAGING PC	3/13/2017	NF-3 Bill Form / HCFA 1500 Form	1/30/2017	73221	\$ 878.67
3149	0577094570101010	ECLIPSE MEDICAL IMAGING PC	3/13/2017	NF-3 Bill Form / HCFA 1500 Form	1/26/2017	73221	\$ 659.00
3150	0577094570101010	ECLIPSE MEDICAL IMAGING PC	3/13/2017	NF-3 Bill Form / HCFA 1500 Form	1/26/2017	72141	\$ 879.73

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Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
3151	0551190780101012	ECLIPSE MEDICAL IMAGING PC	3/13/2017	NF-3 Bill Form / HCFA 1500 Form	1/30/2017	73721	\$ 878.67
3152	0269936890101026	ECLIPSE MEDICAL IMAGING PC	3/13/2017	NF-3 Bill Form / HCFA 1500 Form	1/26/2017	72148	\$ 912.00
3153	0172331470101073	ECLIPSE MEDICAL IMAGING PC	3/13/2017	NF-3 Bill Form / HCFA 1500 Form	1/29/2017	73221	\$ 878.67
3154	0354897900101040	ECLIPSE MEDICAL IMAGING PC	3/13/2017	NF-3 Bill Form / HCFA 1500 Form	1/26/2017	73721	\$ 878.67
3155	0172331470101073	ECLIPSE MEDICAL IMAGING PC	3/13/2017	NF-3 Bill Form / HCFA 1500 Form	1/29/2017	73221	\$ 878.67
3156	0549352370101019	ECLIPSE MEDICAL IMAGING PC	3/13/2017	NF-3 Bill Form / HCFA 1500 Form	1/26/2017	73721	\$ 659.00
3157	0549352370101019	ECLIPSE MEDICAL IMAGING PC	3/13/2017	NF-3 Bill Form / HCFA 1500 Form	1/26/2017	72141	\$ 879.73
3158	0322166050101096	ECLIPSE MEDICAL IMAGING PC	3/13/2017	NF-3 Bill Form / HCFA 1500 Form	1/30/2017	72141	\$ 879.73
3159	0322166050101096	ECLIPSE MEDICAL IMAGING PC	3/13/2017	NF-3 Bill Form / HCFA 1500 Form	1/30/2017	73721	\$ 659.00
3160	0354897900101040	ECLIPSE MEDICAL IMAGING PC	3/14/2017	NF-3 Bill Form / HCFA 1500 Form	1/26/2017	73221	\$ 878.67
3161	0306570140101075	ECLIPSE MEDICAL IMAGING PC	3/14/2017	NF-3 Bill Form / HCFA 1500 Form	1/29/2017	72141	\$ 659.79
3162	0306570140101075	ECLIPSE MEDICAL IMAGING PC	3/14/2017	NF-3 Bill Form / HCFA 1500 Form	1/29/2017	72148	\$ 912.00
3163	0283173950101140	ECLIPSE MEDICAL IMAGING PC	3/14/2017	NF-3 Bill Form / HCFA 1500 Form	2/1/2017	73221	\$ 878.67
3164	0283173950101140	ECLIPSE MEDICAL IMAGING PC	3/14/2017	NF-3 Bill Form / HCFA 1500 Form	2/1/2017	73221	\$ 659.00
3165	0583089410101016	ECLIPSE MEDICAL IMAGING PC	3/14/2017	NF-3 Bill Form / HCFA 1500 Form	2/1/2017	72141	\$ 879.73
3166	0583089410101016	ECLIPSE MEDICAL IMAGING PC	3/14/2017	NF-3 Bill Form / HCFA 1500 Form	2/1/2017	73721	\$ 659.00
3167	0322166050101056	ECLIPSE MEDICAL IMAGING PC	2/27/2017	NF-3 Bill Form / HCFA 1500 Form	1/16/2017	72070	\$ 69.82
3168	0316102630101056	ECLIPSE MEDICAL IMAGING PC	2/27/2017	NF-3 Bill Form / HCFA 1500 Form	1/16/2017	72100	\$ 65.86
3169	0316102630101056	ECLIPSE MEDICAL IMAGING PC	2/27/2017	NF-3 Bill Form / HCFA 1500 Form	1/16/2017	72040	\$ 72.20
3170	0316102630101056	ECLIPSE MEDICAL IMAGING PC	2/27/2017	NF-3 Bill Form / HCFA 1500 Form	1/16/2017	73221	\$ 878.67
3171	0124221070101095	ECLIPSE MEDICAL IMAGING PC	3/20/2017	NF-3 Bill Form / HCFA 1500 Form	2/5/2017	72148	\$ 912.00
3172	0441063760101035	ECLIPSE MEDICAL IMAGING PC	3/20/2017	NF-3 Bill Form / HCFA 1500 Form	2/3/2017	72148	\$ 912.00
3173	0542130330101023	ECLIPSE MEDICAL IMAGING PC	3/20/2017	NF-3 Bill Form / HCFA 1500 Form	2/2/2017	73221	\$ 878.67
3174	0536227170101028	ECLIPSE MEDICAL IMAGING PC	3/20/2017	NF-3 Bill Form / HCFA 1500 Form	2/5/2017	73221	\$ 878.67
3175	0124221070101095	ECLIPSE MEDICAL IMAGING PC	3/20/2017	NF-3 Bill Form / HCFA 1500 Form	2/5/2017	73221	\$ 878.67
3176	0304460670101020	ECLIPSE MEDICAL IMAGING PC	3/20/2017	NF-3 Bill Form / HCFA 1500 Form	2/2/2017	73221	\$ 878.67
3177	0172331470101073	ECLIPSE MEDICAL IMAGING PC	3/20/2017	NF-3 Bill Form / HCFA 1500 Form	2/5/2017	73718	\$ 901.42
3178	0322166050101096	ECLIPSE MEDICAL IMAGING PC	3/20/2017	NF-3 Bill Form / HCFA 1500 Form	2/2/2017	73721	\$ 659.00
3179	0322166050101096	ECLIPSE MEDICAL IMAGING PC	3/20/2017	NF-3 Bill Form / HCFA 1500 Form	2/2/2017	72148	\$ 912.00
3180	0400734420101057	ECLIPSE MEDICAL IMAGING PC	3/20/2017	NF-3 Bill Form / HCFA 1500 Form	2/2/2017	73221	\$ 878.67
3181	0124673250101016	ECLIPSE MEDICAL IMAGING PC	3/20/2017	NF-3 Bill Form / HCFA 1500 Form	2/3/2017	72141	\$ 659.79
3182	0124673250101016	ECLIPSE MEDICAL IMAGING PC	3/20/2017	NF-3 Bill Form / HCFA 1500 Form	2/3/2017	72148	\$ 912.00
3183	0554700490101016	ECLIPSE MEDICAL IMAGING PC	3/20/2017	NF-3 Bill Form / HCFA 1500 Form	2/5/2017	73221	\$ 878.67
3184	0577094570101010	ECLIPSE MEDICAL IMAGING PC	3/20/2017	NF-3 Bill Form / HCFA 1500 Form	2/2/2017	73221	\$ 659.00
3185	0577094570101010	ECLIPSE MEDICAL IMAGING PC	3/20/2017	NF-3 Bill Form / HCFA 1500 Form	2/2/2017	72148	\$ 912.00
3186	0354897900101040	ECLIPSE MEDICAL IMAGING PC	3/20/2017	NF-3 Bill Form / HCFA 1500 Form	2/7/2017	73221	\$ 878.67
3187	0501791030101040	ECLIPSE MEDICAL IMAGING PC	3/21/2017	NF-3 Bill Form / HCFA 1500 Form	2/3/2017	73721	\$ 659.00
3188	0501791030101040	ECLIPSE MEDICAL IMAGING PC	3/21/2017	NF-3 Bill Form / HCFA 1500 Form	2/3/2017	72141	\$ 879.73
3189	0356012480101059	ECLIPSE MEDICAL IMAGING PC	3/23/2017	NF-3 Bill Form / HCFA 1500 Form	2/8/2017	72148	\$ 912.00
3190	0414604430101013	ECLIPSE MEDICAL IMAGING PC	3/23/2017	NF-3 Bill Form / HCFA 1500 Form	2/9/2017	72131	\$ 581.90
3191	0414604430101013	ECLIPSE MEDICAL IMAGING PC	3/23/2017	NF-3 Bill Form / HCFA 1500 Form	2/9/2017	72125	\$ 436.42
3192	0497838960101049	ECLIPSE MEDICAL IMAGING PC	3/23/2017	NF-3 Bill Form / HCFA 1500 Form	2/9/2017	73221	\$ 878.67
3193	0578309630101019	ECLIPSE MEDICAL IMAGING PC	3/24/2017	NF-3 Bill Form / HCFA 1500 Form	2/8/2017	72148	\$ 912.00
3194	0551190780101012	ECLIPSE MEDICAL IMAGING PC	3/27/2017	NF-3 Bill Form / HCFA 1500 Form	2/12/2017	73221	\$ 878.67
3195	0423921250101058	ECLIPSE MEDICAL IMAGING PC	3/27/2017	NF-3 Bill Form / HCFA 1500 Form	2/12/2017	72141	\$ 659.79
3196	0423921250101058	ECLIPSE MEDICAL IMAGING PC	3/27/2017	NF-3 Bill Form / HCFA 1500 Form	2/12/2017	72148	\$ 912.00
3197	0350876480101137	ECLIPSE MEDICAL IMAGING PC	3/27/2017	NF-3 Bill Form / HCFA 1500 Form	2/12/2017	73221	\$ 878.67
3198	0354897900101040	ECLIPSE MEDICAL IMAGING PC	3/27/2017	NF-3 Bill Form / HCFA 1500 Form	2/12/2017	72141	\$ 879.73
3199	0583089410101016	ECLIPSE MEDICAL IMAGING PC	3/27/2017	NF-3 Bill Form / HCFA 1500 Form	2/13/2017	73721	\$ 878.67
3200	0354897900101040	ECLIPSE MEDICAL IMAGING PC	3/27/2017	NF-3 Bill Form / HCFA 1500 Form	2/12/2017	72148	\$ 912.00
3201	0501791030101040	ECLIPSE MEDICAL IMAGING PC	3/28/2017	NF-3 Bill Form / HCFA 1500 Form	2/10/2017	73718	\$ 901.42
3202	0501791030101040	ECLIPSE MEDICAL IMAGING PC	3/28/2017	NF-3 Bill Form / HCFA 1500 Form	2/10/2017	73718	\$ 676.06
3203	0354897900101040	ECLIPSE MEDICAL IMAGING PC	3/31/2017	NF-3 Bill Form / HCFA 1500 Form	2/15/2017	72148	\$ 912.00
3204	0423107380101099	ECLIPSE MEDICAL IMAGING PC	3/13/2017	NF-3 Bill Form / HCFA 1500 Form	1/29/2017	72141	\$ 659.79
3205	0423107380101099	ECLIPSE MEDICAL IMAGING PC	3/13/2017	NF-3 Bill Form / HCFA 1500 Form	1/29/2017	72148	\$ 912.00
3206	0542130330101023	ECLIPSE MEDICAL IMAGING PC	3/31/2017	NF-3 Bill Form / HCFA 1500 Form	2/15/2017	73721	\$ 878.67
3207	0124221070101095	ECLIPSE MEDICAL IMAGING PC	3/31/2017	NF-3 Bill Form / HCFA 1500 Form	2/19/2017	72141	\$ 879.73
3208	0350876480101137	ECLIPSE MEDICAL IMAGING PC	3/31/2017	NF-3 Bill Form / HCFA 1500 Form	2/19/2017	73221	\$ 659.00
3209	0350876480101137	ECLIPSE MEDICAL IMAGING PC	3/31/2017	NF-3 Bill Form / HCFA 1500 Form	2/19/2017	72148	\$ 912.00
3210	0124221070101095	ECLIPSE MEDICAL IMAGING PC	3/31/2017	NF-3 Bill Form / HCFA 1500 Form	2/19/2017	72148	\$ 912.00
3211	0580952510101017	ECLIPSE MEDICAL IMAGING PC	3/31/2017	NF-3 Bill Form / HCFA 1500 Form	2/16/2017	72070	\$ 69.82
3212	0580952510101017	ECLIPSE MEDICAL IMAGING PC	3/31/2017	NF-3 Bill Form / HCFA 1500 Form	2/16/2017	72040	\$ 96.27
3213	0580952510101017	ECLIPSE MEDICAL IMAGING PC	3/31/2017	NF-3 Bill Form / HCFA 1500 Form	2/16/2017	72100	\$ 65.86
3214	0509658620101023	ECLIPSE MEDICAL IMAGING PC	3/31/2017	NF-3 Bill Form / HCFA 1500 Form	2/15/2017	73221	\$ 878.67
3215	0509658620101023	ECLIPSE MEDICAL IMAGING PC	3/31/2017	NF-3 Bill Form / HCFA 1500 Form	2/15/2017	73721	\$ 659.00
3216	0509658620101023	ECLIPSE MEDICAL IMAGING PC	3/31/2017	NF-3 Bill Form / HCFA 1500 Form	2/15/2017	72040	\$ 72.20
3217	0509658620101023	ECLIPSE MEDICAL IMAGING PC	3/31/2017	NF-3 Bill Form / HCFA 1500 Form	2/15/2017	72070	\$ 69.82
3218	0509658620101023	ECLIPSE MEDICAL IMAGING PC	3/31/2017	NF-3 Bill Form / HCFA 1500 Form	2/15/2017	72100	\$ 65.86
3219	0124673250101016	ECLIPSE MEDICAL IMAGING PC	3/31/2017	NF-3 Bill Form / HCFA 1500 Form	2/14/2017	73721	\$ 878.67
3220	0414604430101013	ECLIPSE MEDICAL IMAGING PC	3/31/2017	NF-3 Bill Form / HCFA 1500 Form	2/16/2017	73721	\$ 878.67

Government Employees Insurance Company, et al v. Eclipse Medical Imaging, et al
Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
3221	0544211690101015	ECLIPSE MEDICAL IMAGING PC	3/31/2017	NF-3 Bill Form / HCFA 1500 Form	2/17/2017	72141	\$ 879.73
3222	0347543410101035	ECLIPSE MEDICAL IMAGING PC	3/31/2017	NF-3 Bill Form / HCFA 1500 Form	2/17/2017	72148	\$ 912.00
3223	0347543410101035	ECLIPSE MEDICAL IMAGING PC	3/31/2017	NF-3 Bill Form / HCFA 1500 Form	2/17/2017	72141	\$ 659.79
3224	0354897900101040	ECLIPSE MEDICAL IMAGING PC	3/31/2017	NF-3 Bill Form / HCFA 1500 Form	2/15/2017	72141	\$ 879.73
3225	0399978640101024	ECLIPSE MEDICAL IMAGING PC	4/3/2017	NF-3 Bill Form / HCFA 1500 Form	2/21/2017	72148	\$ 912.00
3226	0312692680101133	ECLIPSE MEDICAL IMAGING PC	4/3/2017	NF-3 Bill Form / HCFA 1500 Form	2/22/2017	72040	\$ 96.27
3227	0307154060101024	ECLIPSE MEDICAL IMAGING PC	3/6/2017	NF-3 Bill Form / HCFA 1500 Form	1/20/2017	72148	\$ 912.00
3228	0400734420101057	ECLIPSE MEDICAL IMAGING PC	4/3/2017	NF-3 Bill Form / HCFA 1500 Form	2/21/2017	72148	\$ 912.00
3229	0400734420101057	ECLIPSE MEDICAL IMAGING PC	4/3/2017	NF-3 Bill Form / HCFA 1500 Form	2/21/2017	72141	\$ 659.79
3230	0569325060101015	ECLIPSE MEDICAL IMAGING PC	4/3/2017	NF-3 Bill Form / HCFA 1500 Form	2/19/2017	73221	\$ 878.67
3231	0583089410101016	ECLIPSE MEDICAL IMAGING PC	4/3/2017	NF-3 Bill Form / HCFA 1500 Form	2/22/2017	72148	\$ 912.00
3232	0583089410101016	ECLIPSE MEDICAL IMAGING PC	4/3/2017	NF-3 Bill Form / HCFA 1500 Form	2/22/2017	72141	\$ 659.79
3233	0520880290101019	ECLIPSE MEDICAL IMAGING PC	4/3/2017	NF-3 Bill Form / HCFA 1500 Form	2/20/2017	73721	\$ 878.67
3234	0304241880101020	ECLIPSE MEDICAL IMAGING PC	4/3/2017	NF-3 Bill Form / HCFA 1500 Form	2/21/2017	73221	\$ 878.67
3235	0414604430101013	ECLIPSE MEDICAL IMAGING PC	4/3/2017	NF-3 Bill Form / HCFA 1500 Form	2/22/2017	73718	\$ 901.42
3236	0509658620101023	ECLIPSE MEDICAL IMAGING PC	4/6/2017	NF-3 Bill Form / HCFA 1500 Form	2/23/2017	72141	\$ 659.79
3237	0509658620101023	ECLIPSE MEDICAL IMAGING PC	4/6/2017	NF-3 Bill Form / HCFA 1500 Form	2/23/2017	72148	\$ 912.00
3238	0489730850101033	ECLIPSE MEDICAL IMAGING PC	4/6/2017	NF-3 Bill Form / HCFA 1500 Form	2/23/2017	72148	\$ 912.00
3239	0489730850101033	ECLIPSE MEDICAL IMAGING PC	4/6/2017	NF-3 Bill Form / HCFA 1500 Form	2/23/2017	72141	\$ 659.79
3240	0198274550101011	ECLIPSE MEDICAL IMAGING PC	4/6/2017	NF-3 Bill Form / HCFA 1500 Form	2/27/2017	72148	\$ 912.00
3241	0554219990101012	ECLIPSE MEDICAL IMAGING PC	4/6/2017	NF-3 Bill Form / HCFA 1500 Form	2/27/2017	72148	\$ 912.00
3242	0576049970101011	ECLIPSE MEDICAL IMAGING PC	4/6/2017	NF-3 Bill Form / HCFA 1500 Form	2/27/2017	73221	\$ 878.67
3243	0501791030101040	ECLIPSE MEDICAL IMAGING PC	4/6/2017	NF-3 Bill Form / HCFA 1500 Form	2/24/2017	73510	\$ 62.68
3244	0501791030101040	ECLIPSE MEDICAL IMAGING PC	4/6/2017	NF-3 Bill Form / HCFA 1500 Form	2/24/2017	73721	\$ 659.00
3245	0501791030101040	ECLIPSE MEDICAL IMAGING PC	4/6/2017	NF-3 Bill Form / HCFA 1500 Form	2/24/2017	72148	\$ 912.00
3246	0398733000101028	ECLIPSE MEDICAL IMAGING PC	4/6/2017	NF-3 Bill Form / HCFA 1500 Form	2/26/2017	73221	\$ 878.67
3247	0398733000101028	ECLIPSE MEDICAL IMAGING PC	4/6/2017	NF-3 Bill Form / HCFA 1500 Form	2/26/2017	73221	\$ 878.67
3248	0477466870101026	ECLIPSE MEDICAL IMAGING PC	4/10/2017	NF-3 Bill Form / HCFA 1500 Form	2/27/2017	72148	\$ 912.00
3249	0583089410101016	ECLIPSE MEDICAL IMAGING PC	4/14/2017	NF-3 Bill Form / HCFA 1500 Form	2/28/2017	72148	\$ 912.00
3250	0362759300101048	ECLIPSE MEDICAL IMAGING PC	4/14/2017	NF-3 Bill Form / HCFA 1500 Form	2/28/2017	72141	\$ 879.73
3251	0583089410101016	ECLIPSE MEDICAL IMAGING PC	4/17/2017	NF-3 Bill Form / HCFA 1500 Form	3/1/2017	70450	\$ 455.47
3252	0172331470101073	ECLIPSE MEDICAL IMAGING PC	4/17/2017	NF-3 Bill Form / HCFA 1500 Form	3/7/2017	72148	\$ 912.00
3253	0551399470101014	ECLIPSE MEDICAL IMAGING PC	4/17/2017	NF-3 Bill Form / HCFA 1500 Form	3/3/2017	73221	\$ 878.67
3254	0580952510101017	ECLIPSE MEDICAL IMAGING PC	4/17/2017	NF-3 Bill Form / HCFA 1500 Form	3/3/2017	72141	\$ 879.73
3255	0304241880101020	ECLIPSE MEDICAL IMAGING PC	4/17/2017	NF-3 Bill Form / HCFA 1500 Form	3/5/2017	72141	\$ 659.79
3256	0304241880101020	ECLIPSE MEDICAL IMAGING PC	4/17/2017	NF-3 Bill Form / HCFA 1500 Form	3/5/2017	72148	\$ 912.00
3257	0584339540101017	ECLIPSE MEDICAL IMAGING PC	4/17/2017	NF-3 Bill Form / HCFA 1500 Form	3/3/2017	73221	\$ 878.67
3258	0520880290101019	ECLIPSE MEDICAL IMAGING PC	4/17/2017	NF-3 Bill Form / HCFA 1500 Form	3/5/2017	72148	\$ 912.00
3259	0520880290101019	ECLIPSE MEDICAL IMAGING PC	4/17/2017	NF-3 Bill Form / HCFA 1500 Form	3/5/2017	72141	\$ 659.79
3260	0398733000101028	ECLIPSE MEDICAL IMAGING PC	4/17/2017	NF-3 Bill Form / HCFA 1500 Form	3/5/2017	72141	\$ 879.73
3261	0092008410101051	ECLIPSE MEDICAL IMAGING PC	4/17/2017	NF-3 Bill Form / HCFA 1500 Form	3/6/2017	73218	\$ 574.49
3262	0092008410101051	ECLIPSE MEDICAL IMAGING PC	4/17/2017	NF-3 Bill Form / HCFA 1500 Form	3/6/2017	72141	\$ 879.73
3263	0348750270101141	ECLIPSE MEDICAL IMAGING PC	4/17/2017	NF-3 Bill Form / HCFA 1500 Form	3/2/2017	72141	\$ 879.73
3264	0172331470101073	ECLIPSE MEDICAL IMAGING PC	4/17/2017	NF-3 Bill Form / HCFA 1500 Form	3/7/2017	72141	\$ 879.73
3265	0332851310101048	ECLIPSE MEDICAL IMAGING PC	4/17/2017	NF-3 Bill Form / HCFA 1500 Form	3/5/2017	72148	\$ 912.00
3266	0332851310101048	ECLIPSE MEDICAL IMAGING PC	4/17/2017	NF-3 Bill Form / HCFA 1500 Form	3/5/2017	72141	\$ 659.79
3267	0398733000101028	ECLIPSE MEDICAL IMAGING PC	4/18/2017	NF-3 Bill Form / HCFA 1500 Form	3/5/2017	72148	\$ 912.00
3268	0348750270101141	ECLIPSE MEDICAL IMAGING PC	4/21/2017	NF-3 Bill Form / HCFA 1500 Form	3/9/2017	73221	\$ 878.67
3269	0398733000101028	ECLIPSE MEDICAL IMAGING PC	4/24/2017	NF-3 Bill Form / HCFA 1500 Form	3/12/2017	72141	\$ 879.73
3270	0172331470101073	ECLIPSE MEDICAL IMAGING PC	4/24/2017	NF-3 Bill Form / HCFA 1500 Form	3/10/2017	72146	\$ 959.61
3271	0569325060101015	ECLIPSE MEDICAL IMAGING PC	4/24/2017	NF-3 Bill Form / HCFA 1500 Form	3/12/2017	72141	\$ 879.73
3272	0172331470101073	ECLIPSE MEDICAL IMAGING PC	4/24/2017	NF-3 Bill Form / HCFA 1500 Form	3/10/2017	72141	\$ 879.73
3273	0551399470101014	ECLIPSE MEDICAL IMAGING PC	4/24/2017	NF-3 Bill Form / HCFA 1500 Form	3/10/2017	73221	\$ 878.67
3274	0350876480101137	ECLIPSE MEDICAL IMAGING PC	4/24/2017	NF-3 Bill Form / HCFA 1500 Form	3/12/2017	72141	\$ 879.73
3275	0569325060101015	ECLIPSE MEDICAL IMAGING PC	4/24/2017	NF-3 Bill Form / HCFA 1500 Form	3/12/2017	72148	\$ 912.00
3276	0398733000101028	ECLIPSE MEDICAL IMAGING PC	4/24/2017	NF-3 Bill Form / HCFA 1500 Form	3/12/2017	72148	\$ 912.00
3277	0551190780101012	ECLIPSE MEDICAL IMAGING PC	4/27/2017	NF-3 Bill Form / HCFA 1500 Form	3/13/2017	72148	\$ 912.00
3278	0549048560101039	ECLIPSE MEDICAL IMAGING PC	4/27/2017	NF-3 Bill Form / HCFA 1500 Form	3/13/2017	73721	\$ 878.67
3279	0549048560101039	ECLIPSE MEDICAL IMAGING PC	4/28/2017	NF-3 Bill Form / HCFA 1500 Form	3/15/2017	73221	\$ 878.67
3280	0399978640101024	ECLIPSE MEDICAL IMAGING PC	4/28/2017	NF-3 Bill Form / HCFA 1500 Form	3/16/2017	72148	\$ 912.00
3281	0571664870101021	ECLIPSE MEDICAL IMAGING PC	4/28/2017	NF-3 Bill Form / HCFA 1500 Form	3/15/2017	73221	\$ 659.00
3282	0571664870101021	ECLIPSE MEDICAL IMAGING PC	4/28/2017	NF-3 Bill Form / HCFA 1500 Form	3/15/2017	71110	\$ 80.94
3283	0571664870101021	ECLIPSE MEDICAL IMAGING PC	4/28/2017	NF-3 Bill Form / HCFA 1500 Form	3/15/2017	71120	\$ 58.71
3284	0571664870101021	ECLIPSE MEDICAL IMAGING PC	4/28/2017	NF-3 Bill Form / HCFA 1500 Form	3/15/2017	73721	\$ 878.67
3285	0551399470101014	ECLIPSE MEDICAL IMAGING PC	5/1/2017	NF-3 Bill Form / HCFA 1500 Form	3/17/2017	72141	\$ 659.79
3286	0551399470101014	ECLIPSE MEDICAL IMAGING PC	5/1/2017	NF-3 Bill Form / HCFA 1500 Form	3/17/2017	72148	\$ 912.00
3287	0240309800101037	ECLIPSE MEDICAL IMAGING PC	5/1/2017	NF-3 Bill Form / HCFA 1500 Form	3/17/2017	70551	\$ 874.44
3288	0240309800101037	ECLIPSE MEDICAL IMAGING PC	5/1/2017	NF-3 Bill Form / HCFA 1500 Form	3/17/2017	73560	\$ 55.54
3289	0240309800101037	ECLIPSE MEDICAL IMAGING PC	5/1/2017	NF-3 Bill Form / HCFA 1500 Form	3/17/2017	73560	\$ 55.54
3290	0240309800101037	ECLIPSE MEDICAL IMAGING PC	5/1/2017	NF-3 Bill Form / HCFA 1500 Form	3/17/2017	73070	\$ 52.77

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Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
3291	0569325060101015	ECLIPSE MEDICAL IMAGING PC	5/1/2017	NF-3 Bill Form / HCFA 1500 Form	3/19/2017	72141	\$ 879.73
3292	0580952510101017	ECLIPSE MEDICAL IMAGING PC	5/1/2017	NF-3 Bill Form / HCFA 1500 Form	3/17/2017	73721	\$ 659.00
3293	0580952510101017	ECLIPSE MEDICAL IMAGING PC	5/1/2017	NF-3 Bill Form / HCFA 1500 Form	3/17/2017	72148	\$ 912.00
3294	0092008410101051	ECLIPSE MEDICAL IMAGING PC	5/1/2017	NF-3 Bill Form / HCFA 1500 Form	3/20/2017	72148	\$ 912.00
3295	0573434420101014	ECLIPSE MEDICAL IMAGING PC	5/1/2017	NF-3 Bill Form / HCFA 1500 Form	3/21/2017	73221	\$ 878.67
3296	0306570140101075	ECLIPSE MEDICAL IMAGING PC	5/1/2017	NF-3 Bill Form / HCFA 1500 Form	3/21/2017	71250	\$ 518.42
3297	0286399830101037	ECLIPSE MEDICAL IMAGING PC	5/1/2017	NF-3 Bill Form / HCFA 1500 Form	3/20/2017	73221	\$ 659.00
3298	0286399830101037	ECLIPSE MEDICAL IMAGING PC	5/1/2017	NF-3 Bill Form / HCFA 1500 Form	3/20/2017	72148	\$ 912.00
3299	0563879500101031	ECLIPSE MEDICAL IMAGING PC	5/1/2017	NF-3 Bill Form / HCFA 1500 Form	3/20/2017	73721	\$ 659.00
3300	0563879500101031	ECLIPSE MEDICAL IMAGING PC	5/1/2017	NF-3 Bill Form / HCFA 1500 Form	3/20/2017	72141	\$ 879.73
3301	0483263190101022	ECLIPSE MEDICAL IMAGING PC	5/2/2017	NF-3 Bill Form / HCFA 1500 Form	3/21/2017	72100	\$ 65.86
3302	0483263190101022	ECLIPSE MEDICAL IMAGING PC	5/2/2017	NF-3 Bill Form / HCFA 1500 Form	3/21/2017	72040	\$ 72.20
3303	0483263190101022	ECLIPSE MEDICAL IMAGING PC	5/2/2017	NF-3 Bill Form / HCFA 1500 Form	3/21/2017	73721	\$ 878.67
3304	0483263190101022	ECLIPSE MEDICAL IMAGING PC	5/2/2017	NF-3 Bill Form / HCFA 1500 Form	3/21/2017	72070	\$ 69.82
3305	0542130330101023	ECLIPSE MEDICAL IMAGING PC	5/8/2017	NF-3 Bill Form / HCFA 1500 Form	3/23/2017	72141	\$ 659.79
3306	0542130330101023	ECLIPSE MEDICAL IMAGING PC	5/8/2017	NF-3 Bill Form / HCFA 1500 Form	3/23/2017	72148	\$ 912.00
3307	0575998400101010	ECLIPSE MEDICAL IMAGING PC	5/8/2017	NF-3 Bill Form / HCFA 1500 Form	3/22/2017	73221	\$ 878.67
3308	0185269040101048	ECLIPSE MEDICAL IMAGING PC	5/8/2017	NF-3 Bill Form / HCFA 1500 Form	3/24/2017	72148	\$ 912.00
3309	0185269040101048	ECLIPSE MEDICAL IMAGING PC	5/8/2017	NF-3 Bill Form / HCFA 1500 Form	3/24/2017	72141	\$ 659.79
3310	0589229250101015	ECLIPSE MEDICAL IMAGING PC	5/8/2017	NF-3 Bill Form / HCFA 1500 Form	3/23/2017	73721	\$ 878.67
3311	0235373740101041	ECLIPSE MEDICAL IMAGING PC	5/8/2017	NF-3 Bill Form / HCFA 1500 Form	3/26/2017	72141	\$ 879.73
3312	0554700490101016	ECLIPSE MEDICAL IMAGING PC	5/8/2017	NF-3 Bill Form / HCFA 1500 Form	3/26/2017	72148	\$ 912.00
3313	0522678350101012	ECLIPSE MEDICAL IMAGING PC	5/8/2017	NF-3 Bill Form / HCFA 1500 Form	3/22/2017	72148	\$ 912.00
3314	0575185610101010	ECLIPSE MEDICAL IMAGING PC	5/8/2017	NF-3 Bill Form / HCFA 1500 Form	3/23/2017	73721	\$ 878.67
3315	0420733070101116	ECLIPSE MEDICAL IMAGING PC	5/8/2017	NF-3 Bill Form / HCFA 1500 Form	3/22/2017	73721	\$ 878.67
3316	0420733070101116	ECLIPSE MEDICAL IMAGING PC	5/8/2017	NF-3 Bill Form / HCFA 1500 Form	3/22/2017	70450	\$ 341.60
3317	0255642620101080	ECLIPSE MEDICAL IMAGING PC	5/8/2017	NF-3 Bill Form / HCFA 1500 Form	3/23/2017	73221	\$ 878.67
3318	0549048560101039	ECLIPSE MEDICAL IMAGING PC	5/11/2017	NF-3 Bill Form / HCFA 1500 Form	3/27/2017	72148	\$ 912.00
3319	0414604430101021	ECLIPSE MEDICAL IMAGING PC	5/11/2017	NF-3 Bill Form / HCFA 1500 Form	3/27/2017	73221	\$ 878.67
3320	0414604430101021	ECLIPSE MEDICAL IMAGING PC	5/11/2017	NF-3 Bill Form / HCFA 1500 Form	3/27/2017	73221	\$ 659.00
3321	0177973370101060	ECLIPSE MEDICAL IMAGING PC	5/11/2017	NF-3 Bill Form / HCFA 1500 Form	3/27/2017	73221	\$ 878.67
3322	0286399830101037	ECLIPSE MEDICAL IMAGING PC	5/11/2017	NF-3 Bill Form / HCFA 1500 Form	3/28/2017	72141	\$ 879.73
3323	0420733070101116	ECLIPSE MEDICAL IMAGING PC	5/11/2017	NF-3 Bill Form / HCFA 1500 Form	3/28/2017	73721	\$ 878.67
3324	0304460670101020	ECLIPSE MEDICAL IMAGING PC	5/12/2017	NF-3 Bill Form / HCFA 1500 Form	3/29/2017	72148	\$ 912.00
3325	0367671840101039	ECLIPSE MEDICAL IMAGING PC	5/12/2017	NF-3 Bill Form / HCFA 1500 Form	3/29/2017	72100	\$ 65.86
3326	0367671840101039	ECLIPSE MEDICAL IMAGING PC	5/12/2017	NF-3 Bill Form / HCFA 1500 Form	3/29/2017	73560	\$ 74.06
3327	0367671840101039	ECLIPSE MEDICAL IMAGING PC	5/12/2017	NF-3 Bill Form / HCFA 1500 Form	3/29/2017	72040	\$ 96.27
3328	0367671840101039	ECLIPSE MEDICAL IMAGING PC	5/12/2017	NF-3 Bill Form / HCFA 1500 Form	3/29/2017	73560	\$ 74.06
3329	0185269040101048	ECLIPSE MEDICAL IMAGING PC	5/12/2017	NF-3 Bill Form / HCFA 1500 Form	3/29/2017	73070	\$ 70.36
3330	0428834360101030	ECLIPSE MEDICAL IMAGING PC	5/12/2017	NF-3 Bill Form / HCFA 1500 Form	3/29/2017	72146	\$ 959.61
3331	0509070940101040	ECLIPSE MEDICAL IMAGING PC	5/15/2017	NF-3 Bill Form / HCFA 1500 Form	4/3/2017	73721	\$ 878.67
3332	0414604430101013	ECLIPSE MEDICAL IMAGING PC	5/15/2017	NF-3 Bill Form / HCFA 1500 Form	3/30/2017	72128	\$ 581.90
3333	0462641350101061	ECLIPSE MEDICAL IMAGING PC	5/15/2017	NF-3 Bill Form / HCFA 1500 Form	4/3/2017	73721	\$ 878.67
3334	0333642230101013	ECLIPSE MEDICAL IMAGING PC	5/15/2017	NF-3 Bill Form / HCFA 1500 Form	3/28/2017	73721	\$ 659.00
3335	0333642230101013	ECLIPSE MEDICAL IMAGING PC	5/15/2017	NF-3 Bill Form / HCFA 1500 Form	3/28/2017	73221	\$ 878.67
3336	0177305700101058	ECLIPSE MEDICAL IMAGING PC	5/15/2017	NF-3 Bill Form / HCFA 1500 Form	3/28/2017	72040	\$ 72.20
3337	0177305700101058	ECLIPSE MEDICAL IMAGING PC	5/15/2017	NF-3 Bill Form / HCFA 1500 Form	3/28/2017	72141	\$ 659.79
3338	0177305700101058	ECLIPSE MEDICAL IMAGING PC	5/15/2017	NF-3 Bill Form / HCFA 1500 Form	3/28/2017	72148	\$ 912.00
3339	0177305700101058	ECLIPSE MEDICAL IMAGING PC	5/15/2017	NF-3 Bill Form / HCFA 1500 Form	3/28/2017	72070	\$ 69.82
3340	0177305700101058	ECLIPSE MEDICAL IMAGING PC	5/15/2017	NF-3 Bill Form / HCFA 1500 Form	3/28/2017	72100	\$ 65.86
3341	0580200740101013	ECLIPSE MEDICAL IMAGING PC	5/15/2017	NF-3 Bill Form / HCFA 1500 Form	4/3/2017	72070	\$ 69.82
3342	0580200740101013	ECLIPSE MEDICAL IMAGING PC	5/15/2017	NF-3 Bill Form / HCFA 1500 Form	4/3/2017	72040	\$ 72.20
3343	0580200740101013	ECLIPSE MEDICAL IMAGING PC	5/15/2017	NF-3 Bill Form / HCFA 1500 Form	4/3/2017	73221	\$ 659.00
3344	0580200740101013	ECLIPSE MEDICAL IMAGING PC	5/15/2017	NF-3 Bill Form / HCFA 1500 Form	4/3/2017	72100	\$ 65.86
3345	0580200740101013	ECLIPSE MEDICAL IMAGING PC	5/15/2017	NF-3 Bill Form / HCFA 1500 Form	4/3/2017	73510	\$ 62.68
3346	0580200740101013	ECLIPSE MEDICAL IMAGING PC	5/15/2017	NF-3 Bill Form / HCFA 1500 Form	4/3/2017	73721	\$ 878.67
3347	0177973370101060	ECLIPSE MEDICAL IMAGING PC	5/15/2017	NF-3 Bill Form / HCFA 1500 Form	4/2/2017	73721	\$ 878.67
3348	0105526350101224	ECLIPSE MEDICAL IMAGING PC	5/15/2017	NF-3 Bill Form / HCFA 1500 Form	3/31/2017	72148	\$ 912.00
3349	0105526350101224	ECLIPSE MEDICAL IMAGING PC	5/15/2017	NF-3 Bill Form / HCFA 1500 Form	3/31/2017	72141	\$ 659.79
3350	0549869330101011	ECLIPSE MEDICAL IMAGING PC	5/15/2017	NF-3 Bill Form / HCFA 1500 Form	3/30/2017	72148	\$ 912.00
3351	0367671840101039	ECLIPSE MEDICAL IMAGING PC	5/15/2017	NF-3 Bill Form / HCFA 1500 Form	3/27/2017	72148	\$ 912.00
3352	0367671840101039	ECLIPSE MEDICAL IMAGING PC	5/15/2017	NF-3 Bill Form / HCFA 1500 Form	3/27/2017	73721	\$ 659.00
3353	0571664870101021	ECLIPSE MEDICAL IMAGING PC	5/19/2017	NF-3 Bill Form / HCFA 1500 Form	4/4/2017	72148	\$ 912.00
3354	0571664870101021	ECLIPSE MEDICAL IMAGING PC	5/19/2017	NF-3 Bill Form / HCFA 1500 Form	4/4/2017	72141	\$ 659.79
3355	0440438670101021	ECLIPSE MEDICAL IMAGING PC	5/19/2017	NF-3 Bill Form / HCFA 1500 Form	4/4/2017	72148	\$ 912.00
3356	0440438670101021	ECLIPSE MEDICAL IMAGING PC	5/19/2017	NF-3 Bill Form / HCFA 1500 Form	4/4/2017	72141	\$ 659.79
3357	0420733070101116	ECLIPSE MEDICAL IMAGING PC	5/19/2017	NF-3 Bill Form / HCFA 1500 Form	4/5/2017	73221	\$ 878.67
3358	0240309800101037	ECLIPSE MEDICAL IMAGING PC	5/19/2017	NF-3 Bill Form / HCFA 1500 Form	4/4/2017	72148	\$ 912.00
3359	0240309800101037	ECLIPSE MEDICAL IMAGING PC	5/19/2017	NF-3 Bill Form / HCFA 1500 Form	4/4/2017	72141	\$ 659.79
3360	0549848840101018	ECLIPSE MEDICAL IMAGING PC	5/19/2017	NF-3 Bill Form / HCFA 1500 Form	4/5/2017	73221	\$ 878.67

Government Employees Insurance Company, et al v. Eclipse Medical Imaging, et al
Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
3361	0426344260101033	ECLIPSE MEDICAL IMAGING PC	5/19/2017	NF-3 Bill Form / HCFA 1500 Form	4/5/2017	70450	\$ 455.47
3362	0307128560101106	ECLIPSE MEDICAL IMAGING PC	5/19/2017	NF-3 Bill Form / HCFA 1500 Form	4/5/2017	72148	\$ 912.00
3363	0543192800101049	ECLIPSE MEDICAL IMAGING PC	5/19/2017	NF-3 Bill Form / HCFA 1500 Form	4/5/2017	72148	\$ 912.00
3364	0543192800101049	ECLIPSE MEDICAL IMAGING PC	5/19/2017	NF-3 Bill Form / HCFA 1500 Form	4/5/2017	72141	\$ 659.79
3365	0545816730101020	ECLIPSE MEDICAL IMAGING PC	5/19/2017	NF-3 Bill Form / HCFA 1500 Form	4/6/2017	72141	\$ 659.79
3366	0545816730101020	ECLIPSE MEDICAL IMAGING PC	5/19/2017	NF-3 Bill Form / HCFA 1500 Form	4/6/2017	72148	\$ 912.00
3367	0553741590101010	ECLIPSE MEDICAL IMAGING PC	5/19/2017	NF-3 Bill Form / HCFA 1500 Form	4/6/2017	72100	\$ 65.86
3368	0553741590101010	ECLIPSE MEDICAL IMAGING PC	5/19/2017	NF-3 Bill Form / HCFA 1500 Form	4/6/2017	72040	\$ 96.27
3369	0569712120101012	ECLIPSE MEDICAL IMAGING PC	5/22/2017	NF-3 Bill Form / HCFA 1500 Form	4/9/2017	70551	\$ 874.44
3370	0568771150101012	ECLIPSE MEDICAL IMAGING PC	5/22/2017	NF-3 Bill Form / HCFA 1500 Form	4/9/2017	72148	\$ 912.00
3371	0568771150101012	ECLIPSE MEDICAL IMAGING PC	5/22/2017	NF-3 Bill Form / HCFA 1500 Form	4/9/2017	72141	\$ 659.79
3372	0571664870101021	ECLIPSE MEDICAL IMAGING PC	5/22/2017	NF-3 Bill Form / HCFA 1500 Form	4/7/2017	72141	\$ 659.79
3373	0571664870101021	ECLIPSE MEDICAL IMAGING PC	5/22/2017	NF-3 Bill Form / HCFA 1500 Form	4/7/2017	72148	\$ 912.00
3374	0235373740101041	ECLIPSE MEDICAL IMAGING PC	5/22/2017	NF-3 Bill Form / HCFA 1500 Form	4/9/2017	72148	\$ 912.00
3375	0551603330101027	ECLIPSE MEDICAL IMAGING PC	5/22/2017	NF-3 Bill Form / HCFA 1500 Form	4/7/2017	73221	\$ 878.67
3376	0580621620101015	ECLIPSE MEDICAL IMAGING PC	5/25/2017	NF-3 Bill Form / HCFA 1500 Form	4/10/2017	72141	\$ 659.79
3377	0580621620101015	ECLIPSE MEDICAL IMAGING PC	5/25/2017	NF-3 Bill Form / HCFA 1500 Form	4/10/2017	72148	\$ 912.00
3378	0591067740101013	ECLIPSE MEDICAL IMAGING PC	5/25/2017	NF-3 Bill Form / HCFA 1500 Form	4/10/2017	72040	\$ 72.20
3379	0591067740101013	ECLIPSE MEDICAL IMAGING PC	5/25/2017	NF-3 Bill Form / HCFA 1500 Form	4/10/2017	72070	\$ 69.82
3380	0591067740101013	ECLIPSE MEDICAL IMAGING PC	5/25/2017	NF-3 Bill Form / HCFA 1500 Form	4/10/2017	72100	\$ 65.86
3381	0591067740101013	ECLIPSE MEDICAL IMAGING PC	5/25/2017	NF-3 Bill Form / HCFA 1500 Form	4/10/2017	73221	\$ 878.67
3382	0544270330101017	ECLIPSE MEDICAL IMAGING PC	5/26/2017	NF-3 Bill Form / HCFA 1500 Form	4/11/2017	73221	\$ 878.67
3383	0569706430101019	ECLIPSE MEDICAL IMAGING PC	5/26/2017	NF-3 Bill Form / HCFA 1500 Form	4/11/2017	72148	\$ 912.00
3384	0569706430101019	ECLIPSE MEDICAL IMAGING PC	5/26/2017	NF-3 Bill Form / HCFA 1500 Form	4/11/2017	72141	\$ 659.79
3385	0537286890101022	ECLIPSE MEDICAL IMAGING PC	5/30/2017	NF-3 Bill Form / HCFA 1500 Form	4/11/2017	72070	\$ 69.82
3386	0537286890101022	ECLIPSE MEDICAL IMAGING PC	5/30/2017	NF-3 Bill Form / HCFA 1500 Form	4/11/2017	72040	\$ 72.20
3387	0537286890101022	ECLIPSE MEDICAL IMAGING PC	5/30/2017	NF-3 Bill Form / HCFA 1500 Form	4/11/2017	72100	\$ 65.86
3388	0537286890101022	ECLIPSE MEDICAL IMAGING PC	5/30/2017	NF-3 Bill Form / HCFA 1500 Form	4/11/2017	73721	\$ 878.67
3389	0580200740101013	ECLIPSE MEDICAL IMAGING PC	5/30/2017	NF-3 Bill Form / HCFA 1500 Form	4/12/2017	72148	\$ 912.00
3390	0580200740101013	ECLIPSE MEDICAL IMAGING PC	5/30/2017	NF-3 Bill Form / HCFA 1500 Form	4/12/2017	72141	\$ 659.79
3391	0510884970101010	ECLIPSE MEDICAL IMAGING PC	5/30/2017	NF-3 Bill Form / HCFA 1500 Form	4/12/2017	73110	\$ 70.36
3392	0510884970101010	ECLIPSE MEDICAL IMAGING PC	5/30/2017	NF-3 Bill Form / HCFA 1500 Form	4/12/2017	73110	\$ 52.77
3393	0468286480101013	ECLIPSE MEDICAL IMAGING PC	5/30/2017	NF-3 Bill Form / HCFA 1500 Form	4/12/2017	70450	\$ 455.47
3394	0537286890101022	ECLIPSE MEDICAL IMAGING PC	5/30/2017	NF-3 Bill Form / HCFA 1500 Form	4/14/2017	72141	\$ 659.79
3395	0537286890101022	ECLIPSE MEDICAL IMAGING PC	5/30/2017	NF-3 Bill Form / HCFA 1500 Form	4/14/2017	72148	\$ 912.00
3396	0252585550101104	ECLIPSE MEDICAL IMAGING PC	5/30/2017	NF-3 Bill Form / HCFA 1500 Form	4/13/2017	72148	\$ 912.00
3397	0414604430101021	ECLIPSE MEDICAL IMAGING PC	5/30/2017	NF-3 Bill Form / HCFA 1500 Form	4/13/2017	72148	\$ 912.00
3398	0414604430101021	ECLIPSE MEDICAL IMAGING PC	5/30/2017	NF-3 Bill Form / HCFA 1500 Form	4/13/2017	72141	\$ 659.79
3399	0426344260101033	ECLIPSE MEDICAL IMAGING PC	5/30/2017	NF-3 Bill Form / HCFA 1500 Form	4/13/2017	70486	\$ 481.91
3400	0568771150101012	ECLIPSE MEDICAL IMAGING PC	5/30/2017	NF-3 Bill Form / HCFA 1500 Form	4/16/2017	72146	\$ 959.61
3401	0551603330101027	ECLIPSE MEDICAL IMAGING PC	5/30/2017	NF-3 Bill Form / HCFA 1500 Form	4/18/2017	72141	\$ 659.79
3402	0551603330101027	ECLIPSE MEDICAL IMAGING PC	5/30/2017	NF-3 Bill Form / HCFA 1500 Form	4/18/2017	72148	\$ 912.00
3403	0554700490101016	ECLIPSE MEDICAL IMAGING PC	5/30/2017	NF-3 Bill Form / HCFA 1500 Form	4/17/2017	72141	\$ 879.73
3404	0563879500101031	ECLIPSE MEDICAL IMAGING PC	5/30/2017	NF-3 Bill Form / HCFA 1500 Form	4/18/2017	72148	\$ 912.00
3405	0564317040101012	ECLIPSE MEDICAL IMAGING PC	5/30/2017	NF-3 Bill Form / HCFA 1500 Form	4/14/2017	72148	\$ 912.00
3406	0528258670101010	ECLIPSE MEDICAL IMAGING PC	6/2/2017	NF-3 Bill Form / HCFA 1500 Form	4/19/2017	72148	\$ 912.00
3407	0527751460101035	ECLIPSE MEDICAL IMAGING PC	6/2/2017	NF-3 Bill Form / HCFA 1500 Form	4/19/2017	73221	\$ 878.67
3408	0527182000101022	ECLIPSE MEDICAL IMAGING PC	6/5/2017	NF-3 Bill Form / HCFA 1500 Form	4/23/2017	72146	\$ 959.61
3409	0333642230101013	ECLIPSE MEDICAL IMAGING PC	6/5/2017	NF-3 Bill Form / HCFA 1500 Form	4/20/2017	72148	\$ 912.00
3410	0333642230101013	ECLIPSE MEDICAL IMAGING PC	6/5/2017	NF-3 Bill Form / HCFA 1500 Form	4/20/2017	72141	\$ 659.79
3411	0589229250101015	ECLIPSE MEDICAL IMAGING PC	6/5/2017	NF-3 Bill Form / HCFA 1500 Form	4/20/2017	73221	\$ 878.67
3412	0542130330101023	ECLIPSE MEDICAL IMAGING PC	6/5/2017	NF-3 Bill Form / HCFA 1500 Form	4/20/2017	73221	\$ 878.67
3413	0305505480101021	ECLIPSE MEDICAL IMAGING PC	6/5/2017	NF-3 Bill Form / HCFA 1500 Form	4/23/2017	73721	\$ 878.67
3414	0561892560101025	ECLIPSE MEDICAL IMAGING PC	6/5/2017	NF-3 Bill Form / HCFA 1500 Form	4/21/2017	72141	\$ 879.73
3415	0516274990101014	ECLIPSE MEDICAL IMAGING PC	6/5/2017	NF-3 Bill Form / HCFA 1500 Form	4/21/2017	73721	\$ 878.67
3416	0516274990101014	ECLIPSE MEDICAL IMAGING PC	6/8/2017	NF-3 Bill Form / HCFA 1500 Form	4/24/2017	73721	\$ 878.67
3417	0517644320101042	ECLIPSE MEDICAL IMAGING PC	6/8/2017	NF-3 Bill Form / HCFA 1500 Form	4/25/2017	73221	\$ 878.67
3418	0516274990101014	ECLIPSE MEDICAL IMAGING PC	6/8/2017	NF-3 Bill Form / HCFA 1500 Form	4/24/2017	73221	\$ 878.67
3419	0517644320101042	ECLIPSE MEDICAL IMAGING PC	6/8/2017	NF-3 Bill Form / HCFA 1500 Form	4/25/2017	73221	\$ 878.67
3420	0381960570101042	ECLIPSE MEDICAL IMAGING PC	6/8/2017	NF-3 Bill Form / HCFA 1500 Form	4/26/2017	73721	\$ 878.67
3421	0431662980101071	ECLIPSE MEDICAL IMAGING PC	6/8/2017	NF-3 Bill Form / HCFA 1500 Form	4/24/2017	73221	\$ 878.67
3422	0584339540101017	ECLIPSE MEDICAL IMAGING PC	6/8/2017	NF-3 Bill Form / HCFA 1500 Form	4/24/2017	73721	\$ 878.67
3423	0446044290101062	ECLIPSE MEDICAL IMAGING PC	6/8/2017	NF-3 Bill Form / HCFA 1500 Form	4/25/2017	73721	\$ 878.67
3424	0348750270101141	ECLIPSE MEDICAL IMAGING PC	6/8/2017	NF-3 Bill Form / HCFA 1500 Form	4/26/2017	73721	\$ 878.67
3425	0232611670101025	ECLIPSE MEDICAL IMAGING PC	6/8/2017	NF-3 Bill Form / HCFA 1500 Form	4/25/2017	73221	\$ 878.67
3426	0251083130101043	ECLIPSE MEDICAL IMAGING PC	6/8/2017	NF-3 Bill Form / HCFA 1500 Form	4/25/2017	72070	\$ 69.82
3427	0251083130101043	ECLIPSE MEDICAL IMAGING PC	6/8/2017	NF-3 Bill Form / HCFA 1500 Form	4/25/2017	72100	\$ 65.86
3428	0251083130101043	ECLIPSE MEDICAL IMAGING PC	6/8/2017	NF-3 Bill Form / HCFA 1500 Form	4/25/2017	72040	\$ 72.20
3429	0251083130101043	ECLIPSE MEDICAL IMAGING PC	6/8/2017	NF-3 Bill Form / HCFA 1500 Form	4/25/2017	73221	\$ 878.67
3430	0591067740101013	ECLIPSE MEDICAL IMAGING PC	6/9/2017	NF-3 Bill Form / HCFA 1500 Form	4/27/2017	72148	\$ 912.00

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Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
3431	0591067740101013	ECLIPSE MEDICAL IMAGING PC	6/9/2017	NF-3 Bill Form / HCFA 1500 Form	4/27/2017	73110	\$ 52.77
3432	0591067740101013	ECLIPSE MEDICAL IMAGING PC	6/9/2017	NF-3 Bill Form / HCFA 1500 Form	4/27/2017	72141	\$ 659.79
3433	0367671840101039	ECLIPSE MEDICAL IMAGING PC	6/9/2017	NF-3 Bill Form / HCFA 1500 Form	4/27/2017	72141	\$ 879.73
3434	0555984630101016	ECLIPSE MEDICAL IMAGING PC	6/9/2017	NF-3 Bill Form / HCFA 1500 Form	4/27/2017	72148	\$ 912.00
3435	0555984630101016	ECLIPSE MEDICAL IMAGING PC	6/9/2017	NF-3 Bill Form / HCFA 1500 Form	4/27/2017	73221	\$ 659.00
3436	0510884970101010	ECLIPSE MEDICAL IMAGING PC	6/9/2017	NF-3 Bill Form / HCFA 1500 Form	4/27/2017	72125	\$ 581.90
3437	0571664870101021	ECLIPSE MEDICAL IMAGING PC	6/9/2017	NF-3 Bill Form / HCFA 1500 Form	4/27/2017	72146	\$ 959.61
3438	0555984630101016	ECLIPSE MEDICAL IMAGING PC	6/12/2017	NF-3 Bill Form / HCFA 1500 Form	4/30/2017	72141	\$ 879.73
3439	0274857410101010	ECLIPSE MEDICAL IMAGING PC	6/12/2017	NF-3 Bill Form / HCFA 1500 Form	4/28/2017	72148	\$ 912.00
3440	0274857410101010	ECLIPSE MEDICAL IMAGING PC	6/12/2017	NF-3 Bill Form / HCFA 1500 Form	4/28/2017	73221	\$ 659.00
3441	0561917920101017	ECLIPSE MEDICAL IMAGING PC	6/12/2017	NF-3 Bill Form / HCFA 1500 Form	4/28/2017	72148	\$ 912.00
3442	0561917920101017	ECLIPSE MEDICAL IMAGING PC	6/12/2017	NF-3 Bill Form / HCFA 1500 Form	4/28/2017	72141	\$ 659.79
3443	0561892560101025	ECLIPSE MEDICAL IMAGING PC	6/12/2017	NF-3 Bill Form / HCFA 1500 Form	4/28/2017	72100	\$ 65.86
3444	0561892560101025	ECLIPSE MEDICAL IMAGING PC	6/12/2017	NF-3 Bill Form / HCFA 1500 Form	4/28/2017	73510	\$ 62.68
3445	0561892560101025	ECLIPSE MEDICAL IMAGING PC	6/12/2017	NF-3 Bill Form / HCFA 1500 Form	4/28/2017	72170	\$ 57.53
3446	0561892560101025	ECLIPSE MEDICAL IMAGING PC	6/12/2017	NF-3 Bill Form / HCFA 1500 Form	4/28/2017	73510	\$ 62.68
3447	0561892560101025	ECLIPSE MEDICAL IMAGING PC	6/12/2017	NF-3 Bill Form / HCFA 1500 Form	4/28/2017	72040	\$ 96.27
3448	0398095970101036	ECLIPSE MEDICAL IMAGING PC	5/12/2017	NF-3 Bill Form / HCFA 1500 Form	3/29/2017	72146	\$ 959.61
3449	0516746460101012	ECLIPSE MEDICAL IMAGING PC	6/15/2017	NF-3 Bill Form / HCFA 1500 Form	5/1/2017	72070	\$ 69.82
3450	0516746460101012	ECLIPSE MEDICAL IMAGING PC	6/15/2017	NF-3 Bill Form / HCFA 1500 Form	5/1/2017	72040	\$ 72.20
3451	0516746460101012	ECLIPSE MEDICAL IMAGING PC	6/15/2017	NF-3 Bill Form / HCFA 1500 Form	5/1/2017	72100	\$ 65.86
3452	0516746460101012	ECLIPSE MEDICAL IMAGING PC	6/15/2017	NF-3 Bill Form / HCFA 1500 Form	5/1/2017	72141	\$ 879.73
3453	0541861330101024	ECLIPSE MEDICAL IMAGING PC	6/15/2017	NF-3 Bill Form / HCFA 1500 Form	5/1/2017	72148	\$ 912.00
3454	0550366050101020	ECLIPSE MEDICAL IMAGING PC	6/15/2017	NF-3 Bill Form / HCFA 1500 Form	5/2/2017	73221	\$ 659.00
3455	0550366050101020	ECLIPSE MEDICAL IMAGING PC	6/15/2017	NF-3 Bill Form / HCFA 1500 Form	5/2/2017	73221	\$ 878.67
3456	0510884970101010	ECLIPSE MEDICAL IMAGING PC	6/15/2017	NF-3 Bill Form / HCFA 1500 Form	5/2/2017	72148	\$ 912.00
3457	0446838100101026	ECLIPSE MEDICAL IMAGING PC	6/15/2017	NF-3 Bill Form / HCFA 1500 Form	5/2/2017	72148	\$ 912.00
3458	0446838100101026	ECLIPSE MEDICAL IMAGING PC	6/15/2017	NF-3 Bill Form / HCFA 1500 Form	5/2/2017	72141	\$ 659.79
3459	0516746460101012	ECLIPSE MEDICAL IMAGING PC	6/15/2017	NF-3 Bill Form / HCFA 1500 Form	5/3/2017	72100	\$ 65.86
3460	0516746460101012	ECLIPSE MEDICAL IMAGING PC	6/15/2017	NF-3 Bill Form / HCFA 1500 Form	5/3/2017	72148	\$ 912.00
3461	0516746460101012	ECLIPSE MEDICAL IMAGING PC	6/15/2017	NF-3 Bill Form / HCFA 1500 Form	5/3/2017	72070	\$ 69.82
3462	0516746460101012	ECLIPSE MEDICAL IMAGING PC	6/15/2017	NF-3 Bill Form / HCFA 1500 Form	5/3/2017	72141	\$ 659.79
3463	0516746460101012	ECLIPSE MEDICAL IMAGING PC	6/15/2017	NF-3 Bill Form / HCFA 1500 Form	5/3/2017	72040	\$ 72.20
3464	0325088790101193	ECLIPSE MEDICAL IMAGING PC	6/15/2017	NF-3 Bill Form / HCFA 1500 Form	5/1/2017	73221	\$ 878.67
3465	0305505480101021	ECLIPSE MEDICAL IMAGING PC	6/16/2017	NF-3 Bill Form / HCFA 1500 Form	5/3/2017	72148	\$ 912.00
3466	0305505480101021	ECLIPSE MEDICAL IMAGING PC	6/16/2017	NF-3 Bill Form / HCFA 1500 Form	5/3/2017	72141	\$ 659.79
3467	0566858760101011	ECLIPSE MEDICAL IMAGING PC	6/16/2017	NF-3 Bill Form / HCFA 1500 Form	5/2/2017	73221	\$ 878.67
3468	0325088790101193	ECLIPSE MEDICAL IMAGING PC	6/16/2017	NF-3 Bill Form / HCFA 1500 Form	5/1/2017	73721	\$ 878.67
3469	0392262880101078	ECLIPSE MEDICAL IMAGING PC	6/16/2017	NF-3 Bill Form / HCFA 1500 Form	5/1/2017	72148	\$ 912.00
3470	0392262880101078	ECLIPSE MEDICAL IMAGING PC	6/16/2017	NF-3 Bill Form / HCFA 1500 Form	5/1/2017	72141	\$ 659.79
3471	0516746460101012	ECLIPSE MEDICAL IMAGING PC	6/16/2017	NF-3 Bill Form / HCFA 1500 Form	5/1/2017	72100	\$ 65.86
3472	0516746460101012	ECLIPSE MEDICAL IMAGING PC	6/16/2017	NF-3 Bill Form / HCFA 1500 Form	5/1/2017	73221	\$ 878.67
3473	0516746460101012	ECLIPSE MEDICAL IMAGING PC	6/16/2017	NF-3 Bill Form / HCFA 1500 Form	5/1/2017	72040	\$ 72.20
3474	0516746460101012	ECLIPSE MEDICAL IMAGING PC	6/16/2017	NF-3 Bill Form / HCFA 1500 Form	5/1/2017	72070	\$ 69.82
3475	0527751460101035	ECLIPSE MEDICAL IMAGING PC	6/16/2017	NF-3 Bill Form / HCFA 1500 Form	5/4/2017	72148	\$ 912.00
3476	0527751460101035	ECLIPSE MEDICAL IMAGING PC	6/16/2017	NF-3 Bill Form / HCFA 1500 Form	5/4/2017	72141	\$ 659.79
3477	0516746460101012	ECLIPSE MEDICAL IMAGING PC	6/19/2017	NF-3 Bill Form / HCFA 1500 Form	5/5/2017	72148	\$ 912.00
3478	0549048560101039	ECLIPSE MEDICAL IMAGING PC	6/19/2017	NF-3 Bill Form / HCFA 1500 Form	5/5/2017	72141	\$ 879.73
3479	0550366050101020	ECLIPSE MEDICAL IMAGING PC	6/19/2017	NF-3 Bill Form / HCFA 1500 Form	5/5/2017	73700	\$ 365.01
3480	0550366050101020	ECLIPSE MEDICAL IMAGING PC	6/19/2017	NF-3 Bill Form / HCFA 1500 Form	5/5/2017	73218	\$ 765.99
3481	0251083130101043	ECLIPSE MEDICAL IMAGING PC	6/19/2017	NF-3 Bill Form / HCFA 1500 Form	5/7/2017	72148	\$ 912.00
3482	0251083130101043	ECLIPSE MEDICAL IMAGING PC	6/19/2017	NF-3 Bill Form / HCFA 1500 Form	5/7/2017	72141	\$ 659.79
3483	0576049970101011	ECLIPSE MEDICAL IMAGING PC	6/19/2017	NF-3 Bill Form / HCFA 1500 Form	5/7/2017	73721	\$ 878.67
3484	0286399830101037	ECLIPSE MEDICAL IMAGING PC	6/19/2017	NF-3 Bill Form / HCFA 1500 Form	5/8/2017	73721	\$ 878.67
3485	0292090370101014	ECLIPSE MEDICAL IMAGING PC	6/19/2017	NF-3 Bill Form / HCFA 1500 Form	5/7/2017	73721	\$ 878.67
3486	0325088790101193	ECLIPSE MEDICAL IMAGING PC	6/23/2017	NF-3 Bill Form / HCFA 1500 Form	5/10/2017	73221	\$ 878.67
3487	0325088790101193	ECLIPSE MEDICAL IMAGING PC	6/23/2017	NF-3 Bill Form / HCFA 1500 Form	5/10/2017	73721	\$ 878.67
3488	0468395070101026	ECLIPSE MEDICAL IMAGING PC	6/23/2017	NF-3 Bill Form / HCFA 1500 Form	5/10/2017	73221	\$ 878.67
3489	0509233920101022	ECLIPSE MEDICAL IMAGING PC	6/23/2017	NF-3 Bill Form / HCFA 1500 Form	5/9/2017	73221	\$ 878.67
3490	0527751460101035	ECLIPSE MEDICAL IMAGING PC	6/23/2017	NF-3 Bill Form / HCFA 1500 Form	5/9/2017	72146	\$ 959.61
3491	0580862120101010	ECLIPSE MEDICAL IMAGING PC	6/23/2017	NF-3 Bill Form / HCFA 1500 Form	5/10/2017	73221	\$ 878.67
3492	0580862120101010	ECLIPSE MEDICAL IMAGING PC	6/26/2017	NF-3 Bill Form / HCFA 1500 Form	5/10/2017	73221	\$ 878.67
3493	0465358970101010	ECLIPSE MEDICAL IMAGING PC	6/26/2017	NF-3 Bill Form / HCFA 1500 Form	5/11/2017	73221	\$ 659.00
3494	0465358970101010	ECLIPSE MEDICAL IMAGING PC	6/26/2017	NF-3 Bill Form / HCFA 1500 Form	5/11/2017	73721	\$ 878.67
3495	0580862120101010	ECLIPSE MEDICAL IMAGING PC	6/26/2017	NF-3 Bill Form / HCFA 1500 Form	5/12/2017	73221	\$ 878.67
3496	0485087600101076	ECLIPSE MEDICAL IMAGING PC	6/26/2017	NF-3 Bill Form / HCFA 1500 Form	5/11/2017	72141	\$ 659.79
3497	0485087600101076	ECLIPSE MEDICAL IMAGING PC	6/26/2017	NF-3 Bill Form / HCFA 1500 Form	5/11/2017	72148	\$ 912.00
3498	0516274990101014	ECLIPSE MEDICAL IMAGING PC	6/26/2017	NF-3 Bill Form / HCFA 1500 Form	5/11/2017	73221	\$ 878.67
3499	0527182000101022	ECLIPSE MEDICAL IMAGING PC	6/26/2017	NF-3 Bill Form / HCFA 1500 Form	5/12/2017	73221	\$ 878.67
3500	0569712120101012	ECLIPSE MEDICAL IMAGING PC	6/26/2017	NF-3 Bill Form / HCFA 1500 Form	5/14/2017	72148	\$ 912.00

Government Employees Insurance Company, et al v. Eclipse Medical Imaging, et al
Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
3501	0569712120101012	ECLIPSE MEDICAL IMAGING PC	6/26/2017	NF-3 Bill Form / HCFA 1500 Form	5/14/2017	72141	\$ 659.79
3502	0539203980101026	ECLIPSE MEDICAL IMAGING PC	6/26/2017	NF-3 Bill Form / HCFA 1500 Form	5/14/2017	73721	\$ 878.67
3503	0232611670101025	ECLIPSE MEDICAL IMAGING PC	6/26/2017	NF-3 Bill Form / HCFA 1500 Form	5/12/2017	72148	\$ 912.00
3504	0246161970101014	ECLIPSE MEDICAL IMAGING PC	6/26/2017	NF-3 Bill Form / HCFA 1500 Form	5/14/2017	73721	\$ 878.67
3505	0561892560101025	ECLIPSE MEDICAL IMAGING PC	6/26/2017	NF-3 Bill Form / HCFA 1500 Form	5/14/2017	72148	\$ 912.00
3506	0381960570101042	ECLIPSE MEDICAL IMAGING PC	6/30/2017	NF-3 Bill Form / HCFA 1500 Form	5/18/2017	73221	\$ 878.67
3507	0550366050101020	ECLIPSE MEDICAL IMAGING PC	6/30/2017	NF-3 Bill Form / HCFA 1500 Form	5/17/2017	72141	\$ 879.73
3508	0550366050101020	ECLIPSE MEDICAL IMAGING PC	6/30/2017	NF-3 Bill Form / HCFA 1500 Form	5/17/2017	72131	\$ 436.42
3509	0372927910101025	ECLIPSE MEDICAL IMAGING PC	6/30/2017	NF-3 Bill Form / HCFA 1500 Form	5/18/2017	70551	\$ 874.44
3510	0549405750105024	ECLIPSE MEDICAL IMAGING PC	6/30/2017	NF-3 Bill Form / HCFA 1500 Form	5/15/2017	73721	\$ 878.67
3511	0564317040101012	ECLIPSE MEDICAL IMAGING PC	6/30/2017	NF-3 Bill Form / HCFA 1500 Form	5/18/2017	73721	\$ 878.67
3512	0558579770101011	ECLIPSE MEDICAL IMAGING PC	7/3/2017	NF-3 Bill Form / HCFA 1500 Form	5/21/2017	72148	\$ 912.00
3513	0305505480101021	ECLIPSE MEDICAL IMAGING PC	7/3/2017	NF-3 Bill Form / HCFA 1500 Form	5/21/2017	73721	\$ 878.67
3514	0561892560101025	ECLIPSE MEDICAL IMAGING PC	7/3/2017	NF-3 Bill Form / HCFA 1500 Form	5/21/2017	72146	\$ 959.61
3515	0274857410101010	ECLIPSE MEDICAL IMAGING PC	7/3/2017	NF-3 Bill Form / HCFA 1500 Form	5/21/2017	72141	\$ 879.73
3516	0559693300101018	ECLIPSE MEDICAL IMAGING PC	7/3/2017	NF-3 Bill Form / HCFA 1500 Form	5/21/2017	73221	\$ 878.57
3517	0381960570101042	ECLIPSE MEDICAL IMAGING PC	7/3/2017	NF-3 Bill Form / HCFA 1500 Form	5/24/2017	73721	\$ 878.67
3518	0488584000101018	ECLIPSE MEDICAL IMAGING PC	7/3/2017	NF-3 Bill Form / HCFA 1500 Form	5/24/2017	73718	\$ 901.42
3519	0488584000101018	ECLIPSE MEDICAL IMAGING PC	7/3/2017	NF-3 Bill Form / HCFA 1500 Form	5/24/2017	73721	\$ 878.67
3520	0310184580101092	ECLIPSE MEDICAL IMAGING PC	7/3/2017	NF-3 Bill Form / HCFA 1500 Form	5/23/2017	72148	\$ 912.00
3521	0310184580101092	ECLIPSE MEDICAL IMAGING PC	7/3/2017	NF-3 Bill Form / HCFA 1500 Form	5/23/2017	73221	\$ 659.00
3522	0292090370101014	ECLIPSE MEDICAL IMAGING PC	7/3/2017	NF-3 Bill Form / HCFA 1500 Form	5/23/2017	72148	\$ 912.00
3523	0558579770101011	ECLIPSE MEDICAL IMAGING PC	7/3/2017	NF-3 Bill Form / HCFA 1500 Form	5/23/2017	72146	\$ 959.61
3524	0583397550101021	ECLIPSE MEDICAL IMAGING PC	7/3/2017	NF-3 Bill Form / HCFA 1500 Form	5/23/2017	73721	\$ 878.67
3525	0589365290101019	ECLIPSE MEDICAL IMAGING PC	7/3/2017	NF-3 Bill Form / HCFA 1500 Form	5/22/2017	72148	\$ 912.00
3526	0589365290101019	ECLIPSE MEDICAL IMAGING PC	7/3/2017	NF-3 Bill Form / HCFA 1500 Form	5/22/2017	73221	\$ 659.00
3527	0346028370101010	ECLIPSE MEDICAL IMAGING PC	7/3/2017	NF-3 Bill Form / HCFA 1500 Form	5/22/2017	72040	\$ 72.20
3528	0346028370101010	ECLIPSE MEDICAL IMAGING PC	7/3/2017	NF-3 Bill Form / HCFA 1500 Form	5/22/2017	72100	\$ 65.86
3529	0346028370101010	ECLIPSE MEDICAL IMAGING PC	7/3/2017	NF-3 Bill Form / HCFA 1500 Form	5/22/2017	73221	\$ 878.67
3530	0346028370101010	ECLIPSE MEDICAL IMAGING PC	7/3/2017	NF-3 Bill Form / HCFA 1500 Form	5/22/2017	72070	\$ 69.82
3531	0528814730101026	ECLIPSE MEDICAL IMAGING PC	7/10/2017	NF-3 Bill Form / HCFA 1500 Form	5/23/2017	73221	\$ 878.67
3532	0549405750105024	ECLIPSE MEDICAL IMAGING PC	7/10/2017	NF-3 Bill Form / HCFA 1500 Form	5/25/2017	73221	\$ 878.67
3533	0380259150101014	ECLIPSE MEDICAL IMAGING PC	7/10/2017	NF-3 Bill Form / HCFA 1500 Form	5/25/2017	72040	\$ 72.20
3534	0380259150101014	ECLIPSE MEDICAL IMAGING PC	7/10/2017	NF-3 Bill Form / HCFA 1500 Form	5/25/2017	72100	\$ 65.86
3535	0380259150101014	ECLIPSE MEDICAL IMAGING PC	7/10/2017	NF-3 Bill Form / HCFA 1500 Form	5/25/2017	72141	\$ 879.73
3536	0380259150101014	ECLIPSE MEDICAL IMAGING PC	7/10/2017	NF-3 Bill Form / HCFA 1500 Form	5/25/2017	72070	\$ 69.82
3537	0380259150101014	ECLIPSE MEDICAL IMAGING PC	7/10/2017	NF-3 Bill Form / HCFA 1500 Form	5/25/2017	72070	\$ 69.82
3538	0380259150101014	ECLIPSE MEDICAL IMAGING PC	7/10/2017	NF-3 Bill Form / HCFA 1500 Form	5/25/2017	73221	\$ 878.67
3539	0380259150101014	ECLIPSE MEDICAL IMAGING PC	7/10/2017	NF-3 Bill Form / HCFA 1500 Form	5/25/2017	72040	\$ 72.20
3540	0465358970101010	ECLIPSE MEDICAL IMAGING PC	7/10/2017	NF-3 Bill Form / HCFA 1500 Form	5/25/2017	72141	\$ 659.79
3541	0465358970101010	ECLIPSE MEDICAL IMAGING PC	7/10/2017	NF-3 Bill Form / HCFA 1500 Form	5/25/2017	72148	\$ 912.00
3542	0488584000101018	ECLIPSE MEDICAL IMAGING PC	7/10/2017	NF-3 Bill Form / HCFA 1500 Form	5/29/2017	72141	\$ 879.73
3543	0488584000101018	ECLIPSE MEDICAL IMAGING PC	7/10/2017	NF-3 Bill Form / HCFA 1500 Form	5/29/2017	73721	\$ 659.00
3544	0468286480101013	ECLIPSE MEDICAL IMAGING PC	7/10/2017	NF-3 Bill Form / HCFA 1500 Form	5/29/2017	72148	\$ 912.00
3545	0537928900101019	ECLIPSE MEDICAL IMAGING PC	7/10/2017	NF-3 Bill Form / HCFA 1500 Form	5/29/2017	72148	\$ 912.00
3546	0509070940101040	ECLIPSE MEDICAL IMAGING PC	7/10/2017	NF-3 Bill Form / HCFA 1500 Form	5/28/2017	72148	\$ 912.00
3547	0509070940101040	ECLIPSE MEDICAL IMAGING PC	7/10/2017	NF-3 Bill Form / HCFA 1500 Form	5/28/2017	72141	\$ 659.79
3548	0537928900101019	ECLIPSE MEDICAL IMAGING PC	7/10/2017	NF-3 Bill Form / HCFA 1500 Form	5/26/2017	72141	\$ 879.73
3549	0323610520101045	ECLIPSE MEDICAL IMAGING PC	7/10/2017	NF-3 Bill Form / HCFA 1500 Form	5/28/2017	73721	\$ 878.67
3550	0539203980101026	ECLIPSE MEDICAL IMAGING PC	7/10/2017	NF-3 Bill Form / HCFA 1500 Form	5/28/2017	72070	\$ 69.82
3551	0539203980101026	ECLIPSE MEDICAL IMAGING PC	7/10/2017	NF-3 Bill Form / HCFA 1500 Form	5/28/2017	73721	\$ 878.67
3552	0539203980101026	ECLIPSE MEDICAL IMAGING PC	7/10/2017	NF-3 Bill Form / HCFA 1500 Form	5/28/2017	72040	\$ 72.20
3553	0539203980101026	ECLIPSE MEDICAL IMAGING PC	7/10/2017	NF-3 Bill Form / HCFA 1500 Form	5/28/2017	72100	\$ 65.86
3554	0467444440101018	ECLIPSE MEDICAL IMAGING PC	7/10/2017	NF-3 Bill Form / HCFA 1500 Form	5/30/2017	74176	\$ 373.47
3555	0539203980101026	ECLIPSE MEDICAL IMAGING PC	7/10/2017	NF-3 Bill Form / HCFA 1500 Form	5/28/2017	73221	\$ 878.67
3556	0539203980101026	ECLIPSE MEDICAL IMAGING PC	7/10/2017	NF-3 Bill Form / HCFA 1500 Form	5/28/2017	72040	\$ 72.20
3557	0539203980101026	ECLIPSE MEDICAL IMAGING PC	7/10/2017	NF-3 Bill Form / HCFA 1500 Form	5/28/2017	72100	\$ 65.86
3558	0539203980101026	ECLIPSE MEDICAL IMAGING PC	7/10/2017	NF-3 Bill Form / HCFA 1500 Form	5/28/2017	72070	\$ 69.82
3559	0589365290101019	ECLIPSE MEDICAL IMAGING PC	7/10/2017	NF-3 Bill Form / HCFA 1500 Form	5/28/2017	72141	\$ 879.73
3560	0556665400101018	ECLIPSE MEDICAL IMAGING PC	7/10/2017	NF-3 Bill Form / HCFA 1500 Form	5/29/2017	73721	\$ 659.00
3561	0556665400101018	ECLIPSE MEDICAL IMAGING PC	7/10/2017	NF-3 Bill Form / HCFA 1500 Form	5/29/2017	72141	\$ 879.73
3562	0537928900101019	ECLIPSE MEDICAL IMAGING PC	7/10/2017	NF-3 Bill Form / HCFA 1500 Form	5/26/2017	72141	\$ 879.73
3563	0468286480101013	ECLIPSE MEDICAL IMAGING PC	7/10/2017	NF-3 Bill Form / HCFA 1500 Form	5/28/2017	72141	\$ 879.73
3564	0310184580101092	ECLIPSE MEDICAL IMAGING PC	7/10/2017	NF-3 Bill Form / HCFA 1500 Form	5/30/2017	72141	\$ 879.73
3565	0539520720101069	ECLIPSE MEDICAL IMAGING PC	7/14/2017	NF-3 Bill Form / HCFA 1500 Form	5/31/2017	73721	\$ 878.67
3566	0408586300101041	ECLIPSE MEDICAL IMAGING PC	7/14/2017	NF-3 Bill Form / HCFA 1500 Form	5/31/2017	72148	\$ 912.00
3567	0346028370101010	ECLIPSE MEDICAL IMAGING PC	7/14/2017	NF-3 Bill Form / HCFA 1500 Form	6/1/2017	72141	\$ 659.79
3568	0346028370101010	ECLIPSE MEDICAL IMAGING PC	7/14/2017	NF-3 Bill Form / HCFA 1500 Form	6/1/2017	72148	\$ 912.00
3569	0539203980101026	ECLIPSE MEDICAL IMAGING PC	7/14/2017	NF-3 Bill Form / HCFA 1500 Form	6/1/2017	72070	\$ 69.82
3570	0539203980101026	ECLIPSE MEDICAL IMAGING PC	7/14/2017	NF-3 Bill Form / HCFA 1500 Form	6/1/2017	72148	\$ 912.00

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Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
3571	0539203980101026	ECLIPSE MEDICAL IMAGING PC	7/14/2017	NF-3 Bill Form / HCFA 1500 Form	6/1/2017	72100	\$ 65.86
3572	0539203980101026	ECLIPSE MEDICAL IMAGING PC	7/14/2017	NF-3 Bill Form / HCFA 1500 Form	6/1/2017	72141	\$ 659.79
3573	0539203980101026	ECLIPSE MEDICAL IMAGING PC	7/14/2017	NF-3 Bill Form / HCFA 1500 Form	6/1/2017	72040	\$ 72.20
3574	0381960570101042	ECLIPSE MEDICAL IMAGING PC	7/14/2017	NF-3 Bill Form / HCFA 1500 Form	5/31/2017	72141	\$ 659.79
3575	0381960570101042	ECLIPSE MEDICAL IMAGING PC	7/14/2017	NF-3 Bill Form / HCFA 1500 Form	5/31/2017	72148	\$ 912.00
3576	0532812650101038	ECLIPSE MEDICAL IMAGING PC	7/14/2017	NF-3 Bill Form / HCFA 1500 Form	6/1/2017	72125	\$ 436.42
3577	0532812650101038	ECLIPSE MEDICAL IMAGING PC	7/14/2017	NF-3 Bill Form / HCFA 1500 Form	6/1/2017	72131	\$ 581.90
3578	0488584000101018	ECLIPSE MEDICAL IMAGING PC	7/14/2017	NF-3 Bill Form / HCFA 1500 Form	5/31/2017	72141	\$ 879.73
3579	0539203980101026	ECLIPSE MEDICAL IMAGING PC	7/14/2017	NF-3 Bill Form / HCFA 1500 Form	5/31/2017	72141	\$ 659.79
3580	0539203980101026	ECLIPSE MEDICAL IMAGING PC	7/14/2017	NF-3 Bill Form / HCFA 1500 Form	5/31/2017	72148	\$ 912.00
3581	0556665400101018	ECLIPSE MEDICAL IMAGING PC	7/17/2017	NF-3 Bill Form / HCFA 1500 Form	6/2/2017	72148	\$ 912.00
3582	0547662550101015	ECLIPSE MEDICAL IMAGING PC	7/17/2017	NF-3 Bill Form / HCFA 1500 Form	6/2/2017	73721	\$ 878.67
3583	0547662550101015	ECLIPSE MEDICAL IMAGING PC	7/17/2017	NF-3 Bill Form / HCFA 1500 Form	6/2/2017	73221	\$ 659.00
3584	0539203980101026	ECLIPSE MEDICAL IMAGING PC	7/17/2017	NF-3 Bill Form / HCFA 1500 Form	6/2/2017	72148	\$ 912.00
3585	0539203980101026	ECLIPSE MEDICAL IMAGING PC	7/17/2017	NF-3 Bill Form / HCFA 1500 Form	6/2/2017	72141	\$ 659.79
3586	0380259150101014	ECLIPSE MEDICAL IMAGING PC	7/17/2017	NF-3 Bill Form / HCFA 1500 Form	6/4/2017	73221	\$ 659.00
3587	0380259150101014	ECLIPSE MEDICAL IMAGING PC	7/17/2017	NF-3 Bill Form / HCFA 1500 Form	6/4/2017	72146	\$ 959.61
3588	0346028370101010	ECLIPSE MEDICAL IMAGING PC	7/17/2017	NF-3 Bill Form / HCFA 1500 Form	6/4/2017	72146	\$ 959.61
3589	0201899330101074	ECLIPSE MEDICAL IMAGING PC	7/20/2017	NF-3 Bill Form / HCFA 1500 Form	6/5/2017	72070	\$ 69.82
3590	0201899330101074	ECLIPSE MEDICAL IMAGING PC	7/20/2017	NF-3 Bill Form / HCFA 1500 Form	6/5/2017	73721	\$ 878.67
3591	0201899330101074	ECLIPSE MEDICAL IMAGING PC	7/20/2017	NF-3 Bill Form / HCFA 1500 Form	6/5/2017	72100	\$ 65.86
3592	0201899330101074	ECLIPSE MEDICAL IMAGING PC	7/20/2017	NF-3 Bill Form / HCFA 1500 Form	6/5/2017	72040	\$ 72.20
3593	0509233920101022	ECLIPSE MEDICAL IMAGING PC	7/20/2017	NF-3 Bill Form / HCFA 1500 Form	6/6/2017	72148	\$ 912.00
3594	0577335070101012	ECLIPSE MEDICAL IMAGING PC	7/20/2017	NF-3 Bill Form / HCFA 1500 Form	6/5/2017	72146	\$ 912.00
3595	0577335070101012	ECLIPSE MEDICAL IMAGING PC	7/20/2017	NF-3 Bill Form / HCFA 1500 Form	6/5/2017	72141	\$ 659.79
3596	0201899330101074	ECLIPSE MEDICAL IMAGING PC	7/20/2017	NF-3 Bill Form / HCFA 1500 Form	6/5/2017	72100	\$ 65.86
3597	0201899330101074	ECLIPSE MEDICAL IMAGING PC	7/20/2017	NF-3 Bill Form / HCFA 1500 Form	6/5/2017	72040	\$ 72.20
3598	0201899330101074	ECLIPSE MEDICAL IMAGING PC	7/20/2017	NF-3 Bill Form / HCFA 1500 Form	6/5/2017	73721	\$ 878.67
3599	0201899330101074	ECLIPSE MEDICAL IMAGING PC	7/20/2017	NF-3 Bill Form / HCFA 1500 Form	6/5/2017	72070	\$ 69.82
3600	0539520720101069	ECLIPSE MEDICAL IMAGING PC	7/19/2017	NF-3 Bill Form / HCFA 1500 Form	6/5/2017	73221	\$ 878.67
3601	0503539300101226	ECLIPSE MEDICAL IMAGING PC	7/21/2017	NF-3 Bill Form / HCFA 1500 Form	6/7/2017	72148	\$ 912.00
3602	0503539300101226	ECLIPSE MEDICAL IMAGING PC	7/21/2017	NF-3 Bill Form / HCFA 1500 Form	6/7/2017	72141	\$ 659.79
3603	0420733070101116	ECLIPSE MEDICAL IMAGING PC	7/21/2017	NF-3 Bill Form / HCFA 1500 Form	6/7/2017	73218	\$ 765.99
3604	0380259150101014	ECLIPSE MEDICAL IMAGING PC	7/21/2017	NF-3 Bill Form / HCFA 1500 Form	6/8/2017	72148	\$ 912.00
3605	0380259150101014	ECLIPSE MEDICAL IMAGING PC	7/21/2017	NF-3 Bill Form / HCFA 1500 Form	6/8/2017	72141	\$ 879.73
3606	0501849930101054	ECLIPSE MEDICAL IMAGING PC	7/21/2017	NF-3 Bill Form / HCFA 1500 Form	6/7/2017	72141	\$ 879.73
3607	0488584000101018	ECLIPSE MEDICAL IMAGING PC	7/21/2017	NF-3 Bill Form / HCFA 1500 Form	6/7/2017	72146	\$ 959.61
3608	0468197680101028	ECLIPSE MEDICAL IMAGING PC	7/24/2017	NF-3 Bill Form / HCFA 1500 Form	6/9/2017	72148	\$ 912.00
3609	0468197680101028	ECLIPSE MEDICAL IMAGING PC	7/24/2017	NF-3 Bill Form / HCFA 1500 Form	6/9/2017	73221	\$ 659.00
3610	0537928900101019	ECLIPSE MEDICAL IMAGING PC	7/24/2017	NF-3 Bill Form / HCFA 1500 Form	6/11/2017	73221	\$ 878.67
3611	0372927910101025	ECLIPSE MEDICAL IMAGING PC	7/24/2017	NF-3 Bill Form / HCFA 1500 Form	6/11/2017	72141	\$ 659.79
3612	0372927910101025	ECLIPSE MEDICAL IMAGING PC	7/24/2017	NF-3 Bill Form / HCFA 1500 Form	6/11/2017	72148	\$ 912.00
3613	0201899330101074	ECLIPSE MEDICAL IMAGING PC	7/24/2017	NF-3 Bill Form / HCFA 1500 Form	6/11/2017	72148	\$ 912.00
3614	0201899330101074	ECLIPSE MEDICAL IMAGING PC	7/24/2017	NF-3 Bill Form / HCFA 1500 Form	6/11/2017	73221	\$ 659.00
3615	0468197680101028	ECLIPSE MEDICAL IMAGING PC	7/24/2017	NF-3 Bill Form / HCFA 1500 Form	6/12/2017	72141	\$ 879.73
3616	0468197680101028	ECLIPSE MEDICAL IMAGING PC	7/24/2017	NF-3 Bill Form / HCFA 1500 Form	6/12/2017	73721	\$ 659.00
3617	0532812650101038	ECLIPSE MEDICAL IMAGING PC	7/24/2017	NF-3 Bill Form / HCFA 1500 Form	6/12/2017	73700	\$ 486.68
3618	0235137090101194	ECLIPSE MEDICAL IMAGING PC	7/24/2017	NF-3 Bill Form / HCFA 1500 Form	6/12/2017	72141	\$ 659.79
3619	0235137090101194	ECLIPSE MEDICAL IMAGING PC	7/24/2017	NF-3 Bill Form / HCFA 1500 Form	6/12/2017	72148	\$ 912.00
3620	0488584000101018	ECLIPSE MEDICAL IMAGING PC	7/24/2017	NF-3 Bill Form / HCFA 1500 Form	6/11/2017	72148	\$ 912.00
3621	0537928900101019	ECLIPSE MEDICAL IMAGING PC	7/24/2017	NF-3 Bill Form / HCFA 1500 Form	6/11/2017	73221	\$ 878.67
3622	0547662550101015	ECLIPSE MEDICAL IMAGING PC	7/27/2017	NF-3 Bill Form / HCFA 1500 Form	6/13/2017	73700	\$ 365.01
3623	0547662550101015	ECLIPSE MEDICAL IMAGING PC	7/27/2017	NF-3 Bill Form / HCFA 1500 Form	6/13/2017	72141	\$ 879.73
3624	0547662550101015	ECLIPSE MEDICAL IMAGING PC	7/27/2017	NF-3 Bill Form / HCFA 1500 Form	6/13/2017	73560	\$ 55.54
3625	0251673370101032	ECLIPSE MEDICAL IMAGING PC	7/27/2017	NF-3 Bill Form / HCFA 1500 Form	6/14/2017	72040	\$ 96.27
3626	0251673370101032	ECLIPSE MEDICAL IMAGING PC	7/27/2017	NF-3 Bill Form / HCFA 1500 Form	6/14/2017	73030	\$ 71.02
3627	0251673370101032	ECLIPSE MEDICAL IMAGING PC	7/27/2017	NF-3 Bill Form / HCFA 1500 Form	6/14/2017	73560	\$ 74.06
3628	0251673370101032	ECLIPSE MEDICAL IMAGING PC	7/27/2017	NF-3 Bill Form / HCFA 1500 Form	6/14/2017	72100	\$ 65.86
3629	0251673370101032	ECLIPSE MEDICAL IMAGING PC	7/27/2017	NF-3 Bill Form / HCFA 1500 Form	6/14/2017	73590	\$ 60.70
3630	0251673370101032	ECLIPSE MEDICAL IMAGING PC	7/27/2017	NF-3 Bill Form / HCFA 1500 Form	6/14/2017	72100	\$ 65.86
3631	0251673370101032	ECLIPSE MEDICAL IMAGING PC	7/27/2017	NF-3 Bill Form / HCFA 1500 Form	6/14/2017	72040	\$ 96.27
3632	0251673370101032	ECLIPSE MEDICAL IMAGING PC	7/27/2017	NF-3 Bill Form / HCFA 1500 Form	6/14/2017	70250	\$ 65.90
3633	0430724440101108	ECLIPSE MEDICAL IMAGING PC	7/27/2017	NF-3 Bill Form / HCFA 1500 Form	6/14/2017	73110	\$ 52.77
3634	0430724440101108	ECLIPSE MEDICAL IMAGING PC	7/27/2017	NF-3 Bill Form / HCFA 1500 Form	6/14/2017	73221	\$ 878.67
3635	0201899330101074	ECLIPSE MEDICAL IMAGING PC	7/27/2017	NF-3 Bill Form / HCFA 1500 Form	6/14/2017	72148	\$ 912.00
3636	0201899330101074	ECLIPSE MEDICAL IMAGING PC	7/27/2017	NF-3 Bill Form / HCFA 1500 Form	6/14/2017	72141	\$ 659.79
3637	0578540920101018	ECLIPSE MEDICAL IMAGING PC	7/27/2017	NF-3 Bill Form / HCFA 1500 Form	6/12/2017	73721	\$ 878.67
3638	0539520720101069	ECLIPSE MEDICAL IMAGING PC	7/27/2017	NF-3 Bill Form / HCFA 1500 Form	6/13/2017	73721	\$ 878.67
3639	0516274990101014	ECLIPSE MEDICAL IMAGING PC	7/27/2017	NF-3 Bill Form / HCFA 1500 Form	6/13/2017	73721	\$ 878.67
3640	0107907570101038	ECLIPSE MEDICAL IMAGING PC	7/27/2017	NF-3 Bill Form / HCFA 1500 Form	6/13/2017	73200	\$ 486.68

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Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
3641	0547662550101015	ECLIPSE MEDICAL IMAGING PC	7/28/2017	NF-3 Bill Form / HCFA 1500 Form	6/15/2017	72148	\$ 912.00
3642	0392262880101078	ECLIPSE MEDICAL IMAGING PC	7/28/2017	NF-3 Bill Form / HCFA 1500 Form	6/15/2017	73221	\$ 878.67
3643	0246161970101014	ECLIPSE MEDICAL IMAGING PC	7/31/2017	NF-3 Bill Form / HCFA 1500 Form	6/18/2017	73221	\$ 878.67
3644	0539283370101026	ECLIPSE MEDICAL IMAGING PC	7/31/2017	NF-3 Bill Form / HCFA 1500 Form	6/19/2017	72070	\$ 69.82
3645	0539283370101026	ECLIPSE MEDICAL IMAGING PC	7/31/2017	NF-3 Bill Form / HCFA 1500 Form	6/19/2017	72100	\$ 65.86
3646	0539283370101026	ECLIPSE MEDICAL IMAGING PC	7/31/2017	NF-3 Bill Form / HCFA 1500 Form	6/19/2017	72040	\$ 72.20
3647	0539283370101026	ECLIPSE MEDICAL IMAGING PC	7/31/2017	NF-3 Bill Form / HCFA 1500 Form	6/19/2017	70551	\$ 874.44
3648	0468197680101028	ECLIPSE MEDICAL IMAGING PC	7/31/2017	NF-3 Bill Form / HCFA 1500 Form	6/16/2017	72148	\$ 912.00
3649	0201899330101074	ECLIPSE MEDICAL IMAGING PC	7/31/2017	NF-3 Bill Form / HCFA 1500 Form	6/16/2017	72141	\$ 879.73
3650	0497730770101030	ECLIPSE MEDICAL IMAGING PC	7/31/2017	NF-3 Bill Form / HCFA 1500 Form	6/18/2017	72141	\$ 879.73
3651	0596105020107014	ECLIPSE MEDICAL IMAGING PC	7/31/2017	NF-3 Bill Form / HCFA 1500 Form	6/19/2017	73721	\$ 878.67
3652	0507003980101028	ECLIPSE MEDICAL IMAGING PC	7/31/2017	NF-3 Bill Form / HCFA 1500 Form	6/19/2017	73200	\$ 486.68
3653	0541861330101016	ECLIPSE MEDICAL IMAGING PC	7/31/2017	NF-3 Bill Form / HCFA 1500 Form	6/16/2017	72141	\$ 879.73
3654	0577335070101012	ECLIPSE MEDICAL IMAGING PC	7/31/2017	NF-3 Bill Form / HCFA 1500 Form	6/19/2017	72146	\$ 959.61
3655	0555512890101010	ECLIPSE MEDICAL IMAGING PC	8/3/2017	NF-3 Bill Form / HCFA 1500 Form	6/20/2017	73721	\$ 878.67
3656	0122650290101018	ECLIPSE MEDICAL IMAGING PC	8/3/2017	NF-3 Bill Form / HCFA 1500 Form	6/20/2017	73221	\$ 878.67
3657	0559714000101023	ECLIPSE MEDICAL IMAGING PC	8/3/2017	NF-3 Bill Form / HCFA 1500 Form	6/20/2017	73721	\$ 878.67
3658	0449632510101016	ECLIPSE MEDICAL IMAGING PC	8/3/2017	NF-3 Bill Form / HCFA 1500 Form	6/20/2017	73721	\$ 878.67
3659	0468197680101028	ECLIPSE MEDICAL IMAGING PC	8/3/2017	NF-3 Bill Form / HCFA 1500 Form	6/20/2017	72141	\$ 879.73
3660	0485395820101028	ECLIPSE MEDICAL IMAGING PC	8/4/2017	NF-3 Bill Form / HCFA 1500 Form	6/21/2017	73221	\$ 878.67
3661	0379172330101049	ECLIPSE MEDICAL IMAGING PC	8/7/2017	NF-3 Bill Form / HCFA 1500 Form	6/22/2017	72148	\$ 912.00
3662	0568256490101013	ECLIPSE MEDICAL IMAGING PC	8/7/2017	NF-3 Bill Form / HCFA 1500 Form	6/25/2017	72148	\$ 912.00
3663	0568256490101013	ECLIPSE MEDICAL IMAGING PC	8/7/2017	NF-3 Bill Form / HCFA 1500 Form	6/25/2017	72141	\$ 659.79
3664	0133514550101067	ECLIPSE MEDICAL IMAGING PC	8/7/2017	NF-3 Bill Form / HCFA 1500 Form	6/25/2017	72148	\$ 912.00
3665	0570179410101010	ECLIPSE MEDICAL IMAGING PC	8/7/2017	NF-3 Bill Form / HCFA 1500 Form	6/23/2017	73221	\$ 878.67
3666	0397051730101015	ECLIPSE MEDICAL IMAGING PC	8/7/2017	NF-3 Bill Form / HCFA 1500 Form	6/23/2017	73221	\$ 659.00
3667	0397051730101015	ECLIPSE MEDICAL IMAGING PC	8/7/2017	NF-3 Bill Form / HCFA 1500 Form	6/23/2017	73718	\$ 901.42
3668	0570179410101010	ECLIPSE MEDICAL IMAGING PC	8/10/2017	NF-3 Bill Form / HCFA 1500 Form	6/27/2017	71100	\$ 88.87
3669	0570179410101010	ECLIPSE MEDICAL IMAGING PC	8/10/2017	NF-3 Bill Form / HCFA 1500 Form	6/27/2017	71120	\$ 58.71
3670	0539520720101069	ECLIPSE MEDICAL IMAGING PC	8/10/2017	NF-3 Bill Form / HCFA 1500 Form	6/27/2017	72148	\$ 912.00
3671	0122650290101018	ECLIPSE MEDICAL IMAGING PC	8/10/2017	NF-3 Bill Form / HCFA 1500 Form	6/26/2017	72141	\$ 879.73
3672	0408743650101051	ECLIPSE MEDICAL IMAGING PC	8/10/2017	NF-3 Bill Form / HCFA 1500 Form	6/27/2017	73721	\$ 878.67
3673	0122650290101018	ECLIPSE MEDICAL IMAGING PC	8/10/2017	NF-3 Bill Form / HCFA 1500 Form	6/26/2017	72148	\$ 912.00
3674	0542597700101017	ECLIPSE MEDICAL IMAGING PC	8/11/2017	NF-3 Bill Form / HCFA 1500 Form	6/28/2017	72141	\$ 659.79
3675	0542597700101017	ECLIPSE MEDICAL IMAGING PC	8/11/2017	NF-3 Bill Form / HCFA 1500 Form	6/28/2017	72148	\$ 912.00
3676	0571261780101017	ECLIPSE MEDICAL IMAGING PC	8/11/2017	NF-3 Bill Form / HCFA 1500 Form	6/28/2017	72040	\$ 96.27
3677	0571261780101017	ECLIPSE MEDICAL IMAGING PC	8/11/2017	NF-3 Bill Form / HCFA 1500 Form	6/28/2017	72100	\$ 65.86
3678	0571261780101017	ECLIPSE MEDICAL IMAGING PC	8/11/2017	NF-3 Bill Form / HCFA 1500 Form	6/28/2017	72070	\$ 69.82
3679	0177973370101060	ECLIPSE MEDICAL IMAGING PC	8/11/2017	NF-3 Bill Form / HCFA 1500 Form	6/28/2017	72148	\$ 912.00
3680	0507542890101032	ECLIPSE MEDICAL IMAGING PC	8/11/2017	NF-3 Bill Form / HCFA 1500 Form	6/29/2017	73721	\$ 878.67
3681	0430724440101108	ECLIPSE MEDICAL IMAGING PC	8/11/2017	NF-3 Bill Form / HCFA 1500 Form	6/28/2017	72148	\$ 912.00
3682	0430724440101108	ECLIPSE MEDICAL IMAGING PC	8/11/2017	NF-3 Bill Form / HCFA 1500 Form	6/28/2017	72141	\$ 659.79
3683	0321008280101028	ECLIPSE MEDICAL IMAGING PC	8/11/2017	NF-3 Bill Form / HCFA 1500 Form	6/29/2017	73221	\$ 878.67
3684	0321008280101028	ECLIPSE MEDICAL IMAGING PC	8/11/2017	NF-3 Bill Form / HCFA 1500 Form	6/29/2017	73221	\$ 659.00
3685	0130247820101079	ECLIPSE MEDICAL IMAGING PC	8/14/2017	NF-3 Bill Form / HCFA 1500 Form	7/9/2017	72146	\$ 959.61
3686	0408743650101051	ECLIPSE MEDICAL IMAGING PC	8/14/2017	NF-3 Bill Form / HCFA 1500 Form	7/9/2017	72141	\$ 659.79
3687	0408743650101051	ECLIPSE MEDICAL IMAGING PC	8/14/2017	NF-3 Bill Form / HCFA 1500 Form	7/9/2017	72148	\$ 912.00
3688	0117592670101027	ECLIPSE MEDICAL IMAGING PC	8/14/2017	NF-3 Bill Form / HCFA 1500 Form	7/5/2017	73721	\$ 878.67
3689	0515284310101017	ECLIPSE MEDICAL IMAGING PC	8/14/2017	NF-3 Bill Form / HCFA 1500 Form	6/30/2017	73221	\$ 878.67
3690	0422799330101012	ECLIPSE MEDICAL IMAGING PC	8/14/2017	NF-3 Bill Form / HCFA 1500 Form	7/5/2017	72141	\$ 659.79
3691	0422799330101012	ECLIPSE MEDICAL IMAGING PC	8/14/2017	NF-3 Bill Form / HCFA 1500 Form	7/5/2017	72148	\$ 912.00
3692	0321008280101028	ECLIPSE MEDICAL IMAGING PC	8/14/2017	NF-3 Bill Form / HCFA 1500 Form	7/10/2017	73718	\$ 676.06
3693	0321008280101028	ECLIPSE MEDICAL IMAGING PC	8/14/2017	NF-3 Bill Form / HCFA 1500 Form	7/10/2017	72148	\$ 912.00
3694	0569009030105021	ECLIPSE MEDICAL IMAGING PC	8/14/2017	NF-3 Bill Form / HCFA 1500 Form	6/30/2017	72100	\$ 65.86
3695	0569009030105021	ECLIPSE MEDICAL IMAGING PC	8/14/2017	NF-3 Bill Form / HCFA 1500 Form	6/30/2017	73221	\$ 878.67
3696	0569009030105021	ECLIPSE MEDICAL IMAGING PC	8/14/2017	NF-3 Bill Form / HCFA 1500 Form	6/30/2017	72040	\$ 72.20
3697	0569009030105021	ECLIPSE MEDICAL IMAGING PC	8/14/2017	NF-3 Bill Form / HCFA 1500 Form	6/30/2017	73560	\$ 74.06
3698	0112098670101202	ECLIPSE MEDICAL IMAGING PC	8/14/2017	NF-3 Bill Form / HCFA 1500 Form	6/30/2017	72141	\$ 879.73
3699	0112098670101202	ECLIPSE MEDICAL IMAGING PC	8/14/2017	NF-3 Bill Form / HCFA 1500 Form	6/30/2017	73721	\$ 659.00
3700	0542597700101017	ECLIPSE MEDICAL IMAGING PC	8/14/2017	NF-3 Bill Form / HCFA 1500 Form	7/5/2017	71020	\$ 78.29
3701	0497461480101058	ECLIPSE MEDICAL IMAGING PC	8/14/2017	NF-3 Bill Form / HCFA 1500 Form	7/6/2017	72148	\$ 912.00
3702	0497461480101058	ECLIPSE MEDICAL IMAGING PC	8/14/2017	NF-3 Bill Form / HCFA 1500 Form	7/6/2017	72141	\$ 659.79
3703	0567867410101023	ECLIPSE MEDICAL IMAGING PC	8/14/2017	NF-3 Bill Form / HCFA 1500 Form	7/3/2017	73721	\$ 878.67
3704	0122650290101018	ECLIPSE MEDICAL IMAGING PC	8/14/2017	NF-3 Bill Form / HCFA 1500 Form	7/5/2017	72141	\$ 879.73
3705	0507003980101028	ECLIPSE MEDICAL IMAGING PC	8/14/2017	NF-3 Bill Form / HCFA 1500 Form	7/5/2017	72125	\$ 436.42
3706	0507003980101028	ECLIPSE MEDICAL IMAGING PC	8/14/2017	NF-3 Bill Form / HCFA 1500 Form	7/5/2017	72131	\$ 581.90
3707	0455471150101064	ECLIPSE MEDICAL IMAGING PC	8/14/2017	NF-3 Bill Form / HCFA 1500 Form	7/2/2017	73221	\$ 878.87
3708	0246161970101014	ECLIPSE MEDICAL IMAGING PC	8/14/2017	NF-3 Bill Form / HCFA 1500 Form	7/2/2017	72148	\$ 912.00
3709	0112098670101202	ECLIPSE MEDICAL IMAGING PC	8/14/2017	NF-3 Bill Form / HCFA 1500 Form	7/5/2017	72148	\$ 912.00
3710	0112098670101202	ECLIPSE MEDICAL IMAGING PC	8/14/2017	NF-3 Bill Form / HCFA 1500 Form	7/5/2017	73721	\$ 659.00

Government Employees Insurance Company, et al v. Eclipse Medical Imaging, et al
Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
3711	0122650290101018	ECLIPSE MEDICAL IMAGING PC	8/14/2017	NF-3 Bill Form / HCFA 1500 Form	7/5/2017	72148	\$ 912.00
3712	0497461480101058	ECLIPSE MEDICAL IMAGING PC	8/14/2017	NF-3 Bill Form / HCFA 1500 Form	7/3/2017	73721	\$ 659.00
3713	0497461480101058	ECLIPSE MEDICAL IMAGING PC	8/14/2017	NF-3 Bill Form / HCFA 1500 Form	7/3/2017	72146	\$ 959.61
3714	0449632510101016	ECLIPSE MEDICAL IMAGING PC	8/14/2017	NF-3 Bill Form / HCFA 1500 Form	6/30/2017	72141	\$ 659.79
3715	0449632510101016	ECLIPSE MEDICAL IMAGING PC	8/14/2017	NF-3 Bill Form / HCFA 1500 Form	6/30/2017	72148	\$ 912.00
3716	0321008280101028	ECLIPSE MEDICAL IMAGING PC	8/15/2017	NF-3 Bill Form / HCFA 1500 Form	7/6/2017	73718	\$ 676.06
3717	0321008280101028	ECLIPSE MEDICAL IMAGING PC	8/15/2017	NF-3 Bill Form / HCFA 1500 Form	7/6/2017	72148	\$ 912.00
3718	0586245030101045	ECLIPSE MEDICAL IMAGING PC	8/21/2017	NF-3 Bill Form / HCFA 1500 Form	7/10/2017	73721	\$ 878.67
3719	0432829520101106	ECLIPSE MEDICAL IMAGING PC	8/21/2017	NF-3 Bill Form / HCFA 1500 Form	7/10/2017	73221	\$ 878.67
3720	0432829520101106	ECLIPSE MEDICAL IMAGING PC	8/24/2017	NF-3 Bill Form / HCFA 1500 Form	7/11/2017	73221	\$ 878.67
3721	0507542890101032	ECLIPSE MEDICAL IMAGING PC	8/24/2017	NF-3 Bill Form / HCFA 1500 Form	7/11/2017	73221	\$ 878.67
3722	0432829520101106	ECLIPSE MEDICAL IMAGING PC	8/24/2017	NF-3 Bill Form / HCFA 1500 Form	7/11/2017	73221	\$ 878.67
3723	0361075180101110	ECLIPSE MEDICAL IMAGING PC	8/25/2017	NF-3 Bill Form / HCFA 1500 Form	7/11/2017	73221	\$ 878.67
3724	0489345170101058	ECLIPSE MEDICAL IMAGING PC	8/25/2017	NF-3 Bill Form / HCFA 1500 Form	8/12/2017	73721	\$ 878.67
3725	0117592670101027	ECLIPSE MEDICAL IMAGING PC	8/25/2017	NF-3 Bill Form / HCFA 1500 Form	7/12/2017	73718	\$ 901.42
3726	0464623700101015	ECLIPSE MEDICAL IMAGING PC	8/25/2017	NF-3 Bill Form / HCFA 1500 Form	7/12/2017	73221	\$ 878.67
3727	0464623700101015	ECLIPSE MEDICAL IMAGING PC	8/25/2017	NF-3 Bill Form / HCFA 1500 Form	7/12/2017	73218	\$ 574.49
3728	0251673370101032	ECLIPSE MEDICAL IMAGING PC	8/25/2017	NF-3 Bill Form / HCFA 1500 Form	7/12/2017	73221	\$ 878.67
3729	0251673370101032	ECLIPSE MEDICAL IMAGING PC	8/25/2017	NF-3 Bill Form / HCFA 1500 Form	7/12/2017	73721	\$ 878.67
3730	0365695920101017	ECLIPSE MEDICAL IMAGING PC	8/25/2017	NF-3 Bill Form / HCFA 1500 Form	7/12/2017	73721	\$ 659.00
3731	0365695920101017	ECLIPSE MEDICAL IMAGING PC	8/25/2017	NF-3 Bill Form / HCFA 1500 Form	7/12/2017	73221	\$ 878.67
3732	0297127400101021	ECLIPSE MEDICAL IMAGING PC	8/28/2017	NF-3 Bill Form / HCFA 1500 Form	7/13/2017	73721	\$ 878.67
3733	0280633380101054	ECLIPSE MEDICAL IMAGING PC	8/28/2017	NF-3 Bill Form / HCFA 1500 Form	7/13/2017	72146	\$ 959.61
3734	0464623700101015	ECLIPSE MEDICAL IMAGING PC	8/28/2017	NF-3 Bill Form / HCFA 1500 Form	7/16/2017	73221	\$ 878.67
3735	0594398740101027	ECLIPSE MEDICAL IMAGING PC	8/28/2017	NF-3 Bill Form / HCFA 1500 Form	7/14/2017	73718	\$ 901.42
3736	0516274990101014	ECLIPSE MEDICAL IMAGING PC	8/28/2017	NF-3 Bill Form / HCFA 1500 Form	7/16/2017	72148	\$ 912.00
3737	0280633380101054	ECLIPSE MEDICAL IMAGING PC	8/28/2017	NF-3 Bill Form / HCFA 1500 Form	7/16/2017	72148	\$ 912.00
3738	0290241190101054	ECLIPSE MEDICAL IMAGING PC	8/28/2017	NF-3 Bill Form / HCFA 1500 Form	7/14/2017	73221	\$ 659.00
3739	0290241190101054	ECLIPSE MEDICAL IMAGING PC	8/28/2017	NF-3 Bill Form / HCFA 1500 Form	7/14/2017	72148	\$ 912.00
3740	0516274990101014	ECLIPSE MEDICAL IMAGING PC	8/28/2017	NF-3 Bill Form / HCFA 1500 Form	7/16/2017	72141	\$ 879.73
3741	0558989570101014	ECLIPSE MEDICAL IMAGING PC	8/28/2017	NF-3 Bill Form / HCFA 1500 Form	7/17/2017	73721	\$ 878.67
3742	0483263190101022	ECLIPSE MEDICAL IMAGING PC	8/28/2017	NF-3 Bill Form / HCFA 1500 Form	7/17/2017	72148	\$ 912.00
3743	0483263190101022	ECLIPSE MEDICAL IMAGING PC	8/28/2017	NF-3 Bill Form / HCFA 1500 Form	7/17/2017	72141	\$ 659.79
3744	0477965680101068	ECLIPSE MEDICAL IMAGING PC	8/28/2017	NF-3 Bill Form / HCFA 1500 Form	7/17/2017	73620	\$ 56.55
3745	0477965680101068	ECLIPSE MEDICAL IMAGING PC	8/28/2017	NF-3 Bill Form / HCFA 1500 Form	7/17/2017	73610	\$ 58.72
3746	0477965680101068	ECLIPSE MEDICAL IMAGING PC	8/28/2017	NF-3 Bill Form / HCFA 1500 Form	7/17/2017	73510	\$ 62.68
3747	0477965680101068	ECLIPSE MEDICAL IMAGING PC	8/28/2017	NF-3 Bill Form / HCFA 1500 Form	7/17/2017	71100	\$ 88.87
3748	0563725100101022	ECLIPSE MEDICAL IMAGING PC	8/28/2017	NF-3 Bill Form / HCFA 1500 Form	7/16/2017	73221	\$ 878.67
3749	0130247820101079	ECLIPSE MEDICAL IMAGING PC	8/28/2017	NF-3 Bill Form / HCFA 1500 Form	7/16/2017	72148	\$ 912.00
3750	0377175160101064	ECLIPSE MEDICAL IMAGING PC	8/28/2017	NF-3 Bill Form / HCFA 1500 Form	7/17/2017	73221	\$ 878.67
3751	0251673370101032	ECLIPSE MEDICAL IMAGING PC	8/31/2017	NF-3 Bill Form / HCFA 1500 Form	7/18/2017	72141	\$ 879.73
3752	0539283370101026	ECLIPSE MEDICAL IMAGING PC	8/31/2017	NF-3 Bill Form / HCFA 1500 Form	7/18/2017	72141	\$ 659.79
3753	0539283370101026	ECLIPSE MEDICAL IMAGING PC	8/31/2017	NF-3 Bill Form / HCFA 1500 Form	7/18/2017	72148	\$ 912.00
3754	0365695920101017	ECLIPSE MEDICAL IMAGING PC	8/31/2017	NF-3 Bill Form / HCFA 1500 Form	7/18/2017	72141	\$ 659.79
3755	0365695920101017	ECLIPSE MEDICAL IMAGING PC	8/31/2017	NF-3 Bill Form / HCFA 1500 Form	7/18/2017	72148	\$ 912.00
3756	0595846600101015	ECLIPSE MEDICAL IMAGING PC	8/31/2017	NF-3 Bill Form / HCFA 1500 Form	7/18/2017	73721	\$ 878.67
3757	0251673370101032	ECLIPSE MEDICAL IMAGING PC	8/31/2017	NF-3 Bill Form / HCFA 1500 Form	7/18/2017	72148	\$ 912.00
3758	0455295620101028	ECLIPSE MEDICAL IMAGING PC	8/31/2017	NF-3 Bill Form / HCFA 1500 Form	7/18/2017	72148	\$ 912.00
3759	0455295620101028	ECLIPSE MEDICAL IMAGING PC	8/31/2017	NF-3 Bill Form / HCFA 1500 Form	7/18/2017	72141	\$ 659.79
3760	0290241190101054	ECLIPSE MEDICAL IMAGING PC	9/5/2017	NF-3 Bill Form / HCFA 1500 Form	7/23/2017	72148	\$ 912.00
3761	0251673370101032	ECLIPSE MEDICAL IMAGING PC	9/5/2017	NF-3 Bill Form / HCFA 1500 Form	7/23/2017	72141	\$ 879.73
3762	0489618980101041	ECLIPSE MEDICAL IMAGING PC	9/5/2017	NF-3 Bill Form / HCFA 1500 Form	7/24/2017	72141	\$ 879.73
3763	0454363160101013	ECLIPSE MEDICAL IMAGING PC	9/5/2017	NF-3 Bill Form / HCFA 1500 Form	8/25/2017	73221	\$ 878.67
3764	0145062570101036	ECLIPSE MEDICAL IMAGING PC	9/5/2017	NF-3 Bill Form / HCFA 1500 Form	7/23/2017	72148	\$ 912.00
3765	0377175160101064	ECLIPSE MEDICAL IMAGING PC	9/5/2017	NF-3 Bill Form / HCFA 1500 Form	7/19/2017	73721	\$ 878.67
3766	0489345170101058	ECLIPSE MEDICAL IMAGING PC	9/5/2017	NF-3 Bill Form / HCFA 1500 Form	7/20/2017	73221	\$ 878.67
3767	0290241190101054	ECLIPSE MEDICAL IMAGING PC	9/5/2017	NF-3 Bill Form / HCFA 1500 Form	7/19/2017	72141	\$ 879.73
3768	0503913490101025	ECLIPSE MEDICAL IMAGING PC	9/5/2017	NF-3 Bill Form / HCFA 1500 Form	7/21/2017	73721	\$ 659.00
3769	0503913490101025	ECLIPSE MEDICAL IMAGING PC	9/5/2017	NF-3 Bill Form / HCFA 1500 Form	7/21/2017	72141	\$ 879.73
3770	0477965680101068	ECLIPSE MEDICAL IMAGING PC	9/5/2017	NF-3 Bill Form / HCFA 1500 Form	7/21/2017	73721	\$ 878.67
3771	0477965680101068	ECLIPSE MEDICAL IMAGING PC	9/5/2017	NF-3 Bill Form / HCFA 1500 Form	7/21/2017	73721	\$ 878.67
3772	0586245030101045	ECLIPSE MEDICAL IMAGING PC	9/5/2017	NF-3 Bill Form / HCFA 1500 Form	7/24/2017	73221	\$ 878.67
3773	0489618980101041	ECLIPSE MEDICAL IMAGING PC	9/5/2017	NF-3 Bill Form / HCFA 1500 Form	7/24/2017	72148	\$ 912.00
3774	0517849250101017	ECLIPSE MEDICAL IMAGING PC	9/5/2017	NF-3 Bill Form / HCFA 1500 Form	7/23/2017	72141	\$ 879.73
3775	0251673370101032	ECLIPSE MEDICAL IMAGING PC	9/5/2017	NF-3 Bill Form / HCFA 1500 Form	7/23/2017	72148	\$ 912.00
3776	0361075180101110	ECLIPSE MEDICAL IMAGING PC	9/5/2017	NF-3 Bill Form / HCFA 1500 Form	7/25/2017	72148	\$ 912.00
3777	0361075180101110	ECLIPSE MEDICAL IMAGING PC	9/5/2017	NF-3 Bill Form / HCFA 1500 Form	7/25/2017	72141	\$ 659.79
3778	0515284310101017	ECLIPSE MEDICAL IMAGING PC	9/5/2017	NF-3 Bill Form / HCFA 1500 Form	7/20/2017	72148	\$ 912.00
3779	0290241190101054	ECLIPSE MEDICAL IMAGING PC	9/5/2017	NF-3 Bill Form / HCFA 1500 Form	7/19/2017	73221	\$ 878.67
3780	0183288730101011	ECLIPSE MEDICAL IMAGING PC	9/5/2017	NF-3 Bill Form / HCFA 1500 Form	7/25/2017	73200	\$ 486.68

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Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
3781	0559714000101023	ECLIPSE MEDICAL IMAGING PC	9/5/2017	NF-3 Bill Form / HCFA 1500 Form	7/25/2017	72148	\$ 912.00
3782	0590379340101017	ECLIPSE MEDICAL IMAGING PC	9/5/2017	NF-3 Bill Form / HCFA 1500 Form	7/20/2017	73721	\$ 878.67
3783	0531686640101014	ECLIPSE MEDICAL IMAGING PC	9/5/2017	NF-3 Bill Form / HCFA 1500 Form	7/20/2017	73110	\$ 52.77
3784	0531686640101014	ECLIPSE MEDICAL IMAGING PC	9/5/2017	NF-3 Bill Form / HCFA 1500 Form	7/20/2017	73721	\$ 659.00
3785	0531686640101014	ECLIPSE MEDICAL IMAGING PC	9/5/2017	NF-3 Bill Form / HCFA 1500 Form	7/20/2017	73221	\$ 878.67
3786	0454363160101013	ECLIPSE MEDICAL IMAGING PC	9/5/2017	NF-3 Bill Form / HCFA 1500 Form	7/25/2017	73721	\$ 878.67
3787	0468395070101026	ECLIPSE MEDICAL IMAGING PC	9/5/2017	NF-3 Bill Form / HCFA 1500 Form	7/19/2017	72141	\$ 879.73
3788	0464623700101015	ECLIPSE MEDICAL IMAGING PC	9/5/2017	NF-3 Bill Form / HCFA 1500 Form	7/25/2017	72148	\$ 912.00
3789	0464623700101015	ECLIPSE MEDICAL IMAGING PC	9/5/2017	NF-3 Bill Form / HCFA 1500 Form	7/25/2017	72141	\$ 659.79
3790	0431662980101071	ECLIPSE MEDICAL IMAGING PC	9/11/2017	NF-3 Bill Form / HCFA 1500 Form	7/26/2017	72148	\$ 912.00
3791	0431662980101071	ECLIPSE MEDICAL IMAGING PC	9/11/2017	NF-3 Bill Form / HCFA 1500 Form	7/26/2017	72141	\$ 659.79
3792	0505324280101050	ECLIPSE MEDICAL IMAGING PC	9/11/2017	NF-3 Bill Form / HCFA 1500 Form	7/27/2017	72148	\$ 912.00
3793	05545014000101017	ECLIPSE MEDICAL IMAGING PC	9/11/2017	NF-3 Bill Form / HCFA 1500 Form	7/27/2017	72141	\$ 879.73
3794	05545014000101017	ECLIPSE MEDICAL IMAGING PC	9/11/2017	NF-3 Bill Form / HCFA 1500 Form	7/27/2017	72150	\$ 388.81
3795	0555512890101010	ECLIPSE MEDICAL IMAGING PC	9/11/2017	NF-3 Bill Form / HCFA 1500 Form	7/26/2017	72148	\$ 912.00
3796	0515264280101023	ECLIPSE MEDICAL IMAGING PC	9/11/2017	NF-3 Bill Form / HCFA 1500 Form	7/31/2017	73221	\$ 878.67
3797	0183288730101011	ECLIPSE MEDICAL IMAGING PC	9/11/2017	NF-3 Bill Form / HCFA 1500 Form	7/31/2017	72125	\$ 436.42
3798	0183288730101011	ECLIPSE MEDICAL IMAGING PC	9/11/2017	NF-3 Bill Form / HCFA 1500 Form	7/31/2017	72131	\$ 581.90
3799	0572385360101011	ECLIPSE MEDICAL IMAGING PC	9/11/2017	NF-3 Bill Form / HCFA 1500 Form	7/31/2017	72148	\$ 912.00
3800	0572385360101011	ECLIPSE MEDICAL IMAGING PC	9/11/2017	NF-3 Bill Form / HCFA 1500 Form	7/31/2017	73221	\$ 659.00
3801	0515264280101023	ECLIPSE MEDICAL IMAGING PC	9/11/2017	NF-3 Bill Form / HCFA 1500 Form	7/31/2017	72141	\$ 879.73
3802	0183068810101051	ECLIPSE MEDICAL IMAGING PC	9/11/2017	NF-3 Bill Form / HCFA 1500 Form	7/27/2017	73721	\$ 878.67
3803	0454363160101013	ECLIPSE MEDICAL IMAGING PC	9/11/2017	NF-3 Bill Form / HCFA 1500 Form	7/28/2017	73221	\$ 878.67
3804	0454363160101013	ECLIPSE MEDICAL IMAGING PC	9/11/2017	NF-3 Bill Form / HCFA 1500 Form	7/28/2017	73721	\$ 878.67
3805	0145062570101036	ECLIPSE MEDICAL IMAGING PC	9/11/2017	NF-3 Bill Form / HCFA 1500 Form	7/30/2017	72146	\$ 959.61
3806	05545014000101017	ECLIPSE MEDICAL IMAGING PC	9/11/2017	NF-3 Bill Form / HCFA 1500 Form	7/30/2017	72148	\$ 912.00
3807	0503913490101025	ECLIPSE MEDICAL IMAGING PC	9/11/2017	NF-3 Bill Form / HCFA 1500 Form	7/28/2017	73221	\$ 659.00
3808	0503913490101025	ECLIPSE MEDICAL IMAGING PC	9/11/2017	NF-3 Bill Form / HCFA 1500 Form	7/28/2017	72148	\$ 912.00
3809	0515264280101023	ECLIPSE MEDICAL IMAGING PC	9/11/2017	NF-3 Bill Form / HCFA 1500 Form	7/26/2017	73721	\$ 878.67
3810	0517849250101017	ECLIPSE MEDICAL IMAGING PC	9/11/2017	NF-3 Bill Form / HCFA 1500 Form	7/27/2017	72148	\$ 912.00
3811	0183068810101051	ECLIPSE MEDICAL IMAGING PC	9/11/2017	NF-3 Bill Form / HCFA 1500 Form	7/27/2017	73721	\$ 878.67
3812	0107907570101038	ECLIPSE MEDICAL IMAGING PC	9/11/2017	NF-3 Bill Form / HCFA 1500 Form	7/26/2017	72131	\$ 436.42
3813	0107907570101038	ECLIPSE MEDICAL IMAGING PC	9/11/2017	NF-3 Bill Form / HCFA 1500 Form	7/26/2017	72125	\$ 581.90
3814	0515264280101023	ECLIPSE MEDICAL IMAGING PC	9/11/2017	NF-3 Bill Form / HCFA 1500 Form	7/26/2017	73221	\$ 878.67
3815	0516274990101014	ECLIPSE MEDICAL IMAGING PC	9/12/2017	NF-3 Bill Form / HCFA 1500 Form	7/31/2017	71020	\$ 78.29
3816	0489618980101041	ECLIPSE MEDICAL IMAGING PC	9/13/2017	NF-3 Bill Form / HCFA 1500 Form	7/31/2017	73560	\$ 55.54
3817	0489618980101041	ECLIPSE MEDICAL IMAGING PC	9/13/2017	NF-3 Bill Form / HCFA 1500 Form	7/31/2017	72148	\$ 912.00
3818	0489618980101041	ECLIPSE MEDICAL IMAGING PC	9/13/2017	NF-3 Bill Form / HCFA 1500 Form	7/31/2017	73560	\$ 55.54
3819	0489618980101041	ECLIPSE MEDICAL IMAGING PC	9/13/2017	NF-3 Bill Form / HCFA 1500 Form	7/31/2017	72040	\$ 72.20
3820	0489618980101041	ECLIPSE MEDICAL IMAGING PC	9/13/2017	NF-3 Bill Form / HCFA 1500 Form	7/31/2017	72141	\$ 879.73
3821	0489618980101041	ECLIPSE MEDICAL IMAGING PC	9/13/2017	NF-3 Bill Form / HCFA 1500 Form	7/31/2017	72100	\$ 65.86
3822	0550588650101015	ECLIPSE MEDICAL IMAGING PC	9/14/2017	NF-3 Bill Form / HCFA 1500 Form	8/1/2017	73221	\$ 878.67
3823	0325535950101025	ECLIPSE MEDICAL IMAGING PC	9/14/2017	NF-3 Bill Form / HCFA 1500 Form	8/1/2017	72141	\$ 659.79
3824	0325535950101025	ECLIPSE MEDICAL IMAGING PC	9/14/2017	NF-3 Bill Form / HCFA 1500 Form	8/1/2017	72148	\$ 912.00
3825	0572385360101011	ECLIPSE MEDICAL IMAGING PC	9/18/2017	NF-3 Bill Form / HCFA 1500 Form	8/3/2017	72141	\$ 879.73
3826	0515264280101023	ECLIPSE MEDICAL IMAGING PC	9/18/2017	NF-3 Bill Form / HCFA 1500 Form	8/3/2017	72141	\$ 879.73
3827	0240309800101037	ECLIPSE MEDICAL IMAGING PC	9/18/2017	NF-3 Bill Form / HCFA 1500 Form	8/2/2017	73721	\$ 878.67
3828	0531686640101014	ECLIPSE MEDICAL IMAGING PC	9/18/2017	NF-3 Bill Form / HCFA 1500 Form	8/2/2017	72148	\$ 912.00
3829	0531686640101014	ECLIPSE MEDICAL IMAGING PC	9/18/2017	NF-3 Bill Form / HCFA 1500 Form	8/2/2017	72141	\$ 659.79
3830	0531686640101014	ECLIPSE MEDICAL IMAGING PC	9/18/2017	NF-3 Bill Form / HCFA 1500 Form	8/2/2017	73600	\$ 54.75
3831	0571261780101017	ECLIPSE MEDICAL IMAGING PC	9/18/2017	NF-3 Bill Form / HCFA 1500 Form	8/3/2017	72141	\$ 659.79
3832	0571261780101017	ECLIPSE MEDICAL IMAGING PC	9/18/2017	NF-3 Bill Form / HCFA 1500 Form	8/3/2017	72148	\$ 912.00
3833	0515264280101023	ECLIPSE MEDICAL IMAGING PC	9/18/2017	NF-3 Bill Form / HCFA 1500 Form	8/3/2017	72148	\$ 912.00
3834	0240309800101037	ECLIPSE MEDICAL IMAGING PC	9/18/2017	NF-3 Bill Form / HCFA 1500 Form	8/4/2017	73721	\$ 878.67
3835	0595846600101015	ECLIPSE MEDICAL IMAGING PC	9/18/2017	NF-3 Bill Form / HCFA 1500 Form	8/6/2017	72148	\$ 912.00
3836	0595846600101015	ECLIPSE MEDICAL IMAGING PC	9/18/2017	NF-3 Bill Form / HCFA 1500 Form	8/6/2017	72141	\$ 659.79
3837	0336842660101072	ECLIPSE MEDICAL IMAGING PC	9/19/2017	NF-3 Bill Form / HCFA 1500 Form	8/7/2017	73221	\$ 659.00
3838	0336842660101072	ECLIPSE MEDICAL IMAGING PC	9/19/2017	NF-3 Bill Form / HCFA 1500 Form	8/7/2017	73718	\$ 901.42
3839	0580653290101017	ECLIPSE MEDICAL IMAGING PC	9/21/2017	NF-3 Bill Form / HCFA 1500 Form	8/8/2017	73721	\$ 878.67
3840	0580653290101017	ECLIPSE MEDICAL IMAGING PC	9/21/2017	NF-3 Bill Form / HCFA 1500 Form	8/8/2017	73140	\$ 40.06
3841	0521169530101032	ECLIPSE MEDICAL IMAGING PC	9/21/2017	NF-3 Bill Form / HCFA 1500 Form	8/8/2017	72170	\$ 76.71
3842	0574187810101015	ECLIPSE MEDICAL IMAGING PC	9/21/2017	NF-3 Bill Form / HCFA 1500 Form	8/8/2017	72141	\$ 879.73
3843	0582214660101018	ECLIPSE MEDICAL IMAGING PC	9/21/2017	NF-3 Bill Form / HCFA 1500 Form	8/8/2017	73221	\$ 878.67
3844	0106092320101140	ECLIPSE MEDICAL IMAGING PC	9/22/2017	NF-3 Bill Form / HCFA 1500 Form	8/10/2017	72148	\$ 912.00
3845	0477965680101068	ECLIPSE MEDICAL IMAGING PC	9/22/2017	NF-3 Bill Form / HCFA 1500 Form	8/10/2017	72141	\$ 659.79
3846	0477965680101068	ECLIPSE MEDICAL IMAGING PC	9/22/2017	NF-3 Bill Form / HCFA 1500 Form	8/10/2017	72148	\$ 912.00
3847	0477965680101068	ECLIPSE MEDICAL IMAGING PC	9/22/2017	NF-3 Bill Form / HCFA 1500 Form	8/9/2017	72141	\$ 659.79
3848	0477965680101068	ECLIPSE MEDICAL IMAGING PC	9/22/2017	NF-3 Bill Form / HCFA 1500 Form	8/9/2017	72148	\$ 912.00
3849	0336842660101072	ECLIPSE MEDICAL IMAGING PC	9/22/2017	NF-3 Bill Form / HCFA 1500 Form	8/9/2017	73718	\$ 901.42
3850	0336842660101072	ECLIPSE MEDICAL IMAGING PC	9/22/2017	NF-3 Bill Form / HCFA 1500 Form	8/9/2017	73221	\$ 659.00

Government Employees Insurance Company, et al v. Eclipse Medical Imaging, et al
Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
3851	0414169020101047	ECLIPSE MEDICAL IMAGING PC	9/22/2017	NF-3 Bill Form / HCFA 1500 Form	8/8/2017	73721	\$ 878.67
3852	0435540130101033	ECLIPSE MEDICAL IMAGING PC	9/22/2017	NF-3 Bill Form / HCFA 1500 Form	8/9/2017	72148	\$ 912.00
3853	0435540130101033	ECLIPSE MEDICAL IMAGING PC	9/22/2017	NF-3 Bill Form / HCFA 1500 Form	8/9/2017	72141	\$ 659.79
3854	0175796370101109	ECLIPSE MEDICAL IMAGING PC	9/22/2017	NF-3 Bill Form / HCFA 1500 Form	8/10/2017	72070	\$ 69.82
3855	0175796370101109	ECLIPSE MEDICAL IMAGING PC	9/22/2017	NF-3 Bill Form / HCFA 1500 Form	8/10/2017	73610	\$ 58.72
3856	0175796370101109	ECLIPSE MEDICAL IMAGING PC	9/22/2017	NF-3 Bill Form / HCFA 1500 Form	8/10/2017	72100	\$ 65.86
3857	0175796370101109	ECLIPSE MEDICAL IMAGING PC	9/22/2017	NF-3 Bill Form / HCFA 1500 Form	8/10/2017	73510	\$ 62.68
3858	0175796370101109	ECLIPSE MEDICAL IMAGING PC	9/22/2017	NF-3 Bill Form / HCFA 1500 Form	8/10/2017	72040	\$ 96.27
3859	0602118830101020	ECLIPSE MEDICAL IMAGING PC	9/22/2017	NF-3 Bill Form / HCFA 1500 Form	8/10/2017	72100	\$ 65.86
3860	0602118830101020	ECLIPSE MEDICAL IMAGING PC	9/22/2017	NF-3 Bill Form / HCFA 1500 Form	8/10/2017	72040	\$ 72.20
3861	0602118830101020	ECLIPSE MEDICAL IMAGING PC	9/22/2017	NF-3 Bill Form / HCFA 1500 Form	8/10/2017	73721	\$ 659.00
3862	0602118830101020	ECLIPSE MEDICAL IMAGING PC	9/22/2017	NF-3 Bill Form / HCFA 1500 Form	8/10/2017	72070	\$ 69.82
3863	0602118830101020	ECLIPSE MEDICAL IMAGING PC	9/22/2017	NF-3 Bill Form / HCFA 1500 Form	8/10/2017	73221	\$ 878.67
3864	0589219970101023	ECLIPSE MEDICAL IMAGING PC	9/22/2017	NF-3 Bill Form / HCFA 1500 Form	8/9/2017	72148	\$ 912.00
3865	0589219970101023	ECLIPSE MEDICAL IMAGING PC	9/22/2017	NF-3 Bill Form / HCFA 1500 Form	8/9/2017	72141	\$ 659.79
3866	0575849230101037	ECLIPSE MEDICAL IMAGING PC	9/25/2017	NF-3 Bill Form / HCFA 1500 Form	8/13/2017	73221	\$ 659.00
3867	0575849230101037	ECLIPSE MEDICAL IMAGING PC	9/25/2017	NF-3 Bill Form / HCFA 1500 Form	8/13/2017	73721	\$ 878.67
3868	0183068810101051	ECLIPSE MEDICAL IMAGING PC	9/25/2017	NF-3 Bill Form / HCFA 1500 Form	8/13/2017	72148	\$ 912.00
3869	0183068810101051	ECLIPSE MEDICAL IMAGING PC	9/25/2017	NF-3 Bill Form / HCFA 1500 Form	8/13/2017	72141	\$ 659.79
3870	0550705540101043	ECLIPSE MEDICAL IMAGING PC	9/25/2017	NF-3 Bill Form / HCFA 1500 Form	8/11/2017	73721	\$ 878.67
3871	0414169020101047	ECLIPSE MEDICAL IMAGING PC	9/25/2017	NF-3 Bill Form / HCFA 1500 Form	8/11/2017	73721	\$ 878.67
3872	0555512890101010	ECLIPSE MEDICAL IMAGING PC	9/25/2017	NF-3 Bill Form / HCFA 1500 Form	7/28/2017	72141	\$ 879.73
3873	0531686640101014	ECLIPSE MEDICAL IMAGING PC	9/25/2017	NF-3 Bill Form / HCFA 1500 Form	8/13/2017	73721	\$ 878.67
3874	0531686640101014	ECLIPSE MEDICAL IMAGING PC	9/25/2017	NF-3 Bill Form / HCFA 1500 Form	8/13/2017	73221	\$ 659.00
3875	0589219970101023	ECLIPSE MEDICAL IMAGING PC	9/25/2017	NF-3 Bill Form / HCFA 1500 Form	8/14/2017	72146	\$ 959.61
3876	0531686640101014	ECLIPSE MEDICAL IMAGING PC	9/28/2017	NF-3 Bill Form / HCFA 1500 Form	8/14/2017	73721	\$ 878.67
3877	0577758350101032	ECLIPSE MEDICAL IMAGING PC	9/28/2017	NF-3 Bill Form / HCFA 1500 Form	8/14/2017	73721	\$ 878.67
3878	0183068810101051	ECLIPSE MEDICAL IMAGING PC	9/28/2017	NF-3 Bill Form / HCFA 1500 Form	8/15/2017	72148	\$ 912.00
3879	0183068810101051	ECLIPSE MEDICAL IMAGING PC	9/28/2017	NF-3 Bill Form / HCFA 1500 Form	8/15/2017	72141	\$ 659.79
3880	0454363160101013	ECLIPSE MEDICAL IMAGING PC	9/28/2017	NF-3 Bill Form / HCFA 1500 Form	8/14/2017	72141	\$ 659.79
3881	0454363160101013	ECLIPSE MEDICAL IMAGING PC	9/28/2017	NF-3 Bill Form / HCFA 1500 Form	8/14/2017	72148	\$ 912.00
3882	0575849230101037	ECLIPSE MEDICAL IMAGING PC	9/29/2017	NF-3 Bill Form / HCFA 1500 Form	8/16/2017	73721	\$ 878.67
3883	0451041510101015	ECLIPSE MEDICAL IMAGING PC	9/29/2017	NF-3 Bill Form / HCFA 1500 Form	8/16/2017	73221	\$ 878.67
3884	0166983200101068	ECLIPSE MEDICAL IMAGING PC	9/29/2017	NF-3 Bill Form / HCFA 1500 Form	8/16/2017	73221	\$ 878.67
3885	0531686640101014	ECLIPSE MEDICAL IMAGING PC	10/2/2017	NF-3 Bill Form / HCFA 1500 Form	8/17/2017	72148	\$ 912.00
3886	0531686640101014	ECLIPSE MEDICAL IMAGING PC	10/2/2017	NF-3 Bill Form / HCFA 1500 Form	8/17/2017	73100	\$ 46.42
3887	0379603270101045	ECLIPSE MEDICAL IMAGING PC	10/2/2017	NF-3 Bill Form / HCFA 1500 Form	8/21/2017	73721	\$ 878.67
3888	0463558610101013	ECLIPSE MEDICAL IMAGING PC	10/2/2017	NF-3 Bill Form / HCFA 1500 Form	8/21/2017	73221	\$ 878.67
3889	0463558610101013	ECLIPSE MEDICAL IMAGING PC	10/2/2017	NF-3 Bill Form / HCFA 1500 Form	8/21/2017	73721	\$ 659.00
3890	0425809390101013	ECLIPSE MEDICAL IMAGING PC	10/2/2017	NF-3 Bill Form / HCFA 1500 Form	8/17/2017	70450	\$ 455.47
3891	0557753750101017	ECLIPSE MEDICAL IMAGING PC	10/2/2017	NF-3 Bill Form / HCFA 1500 Form	8/17/2017	73070	\$ 52.77
3892	0557753750101017	ECLIPSE MEDICAL IMAGING PC	10/2/2017	NF-3 Bill Form / HCFA 1500 Form	8/17/2017	73070	\$ 70.36
3893	0527816850101034	ECLIPSE MEDICAL IMAGING PC	10/2/2017	NF-3 Bill Form / HCFA 1500 Form	8/17/2017	73221	\$ 878.67
3894	0468197680101028	ECLIPSE MEDICAL IMAGING PC	10/2/2017	NF-3 Bill Form / HCFA 1500 Form	8/17/2017	70450	\$ 455.47
3895	0336842660101072	ECLIPSE MEDICAL IMAGING PC	10/3/2017	NF-3 Bill Form / HCFA 1500 Form	8/21/2017	72141	\$ 659.79
3896	0336842660101072	ECLIPSE MEDICAL IMAGING PC	10/3/2017	NF-3 Bill Form / HCFA 1500 Form	8/21/2017	72148	\$ 912.00
3897	0454363160101013	ECLIPSE MEDICAL IMAGING PC	10/3/2017	NF-3 Bill Form / HCFA 1500 Form	8/18/2017	73221	\$ 878.67
3898	0403537540101031	ECLIPSE MEDICAL IMAGING PC	10/3/2017	NF-3 Bill Form / HCFA 1500 Form	8/21/2017	72141	\$ 659.79
3899	0403537540101031	ECLIPSE MEDICAL IMAGING PC	10/3/2017	NF-3 Bill Form / HCFA 1500 Form	8/21/2017	72148	\$ 912.00
3900	0572035920101031	ECLIPSE MEDICAL IMAGING PC	10/3/2017	NF-3 Bill Form / HCFA 1500 Form	8/20/2017	73221	\$ 878.67
3901	0594398740101027	ECLIPSE MEDICAL IMAGING PC	10/5/2017	NF-3 Bill Form / HCFA 1500 Form	8/23/2017	72141	\$ 659.79
3902	0594398740101027	ECLIPSE MEDICAL IMAGING PC	10/5/2017	NF-3 Bill Form / HCFA 1500 Form	8/23/2017	72148	\$ 912.00
3903	0527816850101034	ECLIPSE MEDICAL IMAGING PC	10/5/2017	NF-3 Bill Form / HCFA 1500 Form	8/23/2017	73721	\$ 878.67
3904	0182048460101040	ECLIPSE MEDICAL IMAGING PC	10/5/2017	NF-3 Bill Form / HCFA 1500 Form	8/22/2017	73721	\$ 878.67
3905	0560603620101033	ECLIPSE MEDICAL IMAGING PC	10/5/2017	NF-3 Bill Form / HCFA 1500 Form	8/23/2017	73721	\$ 878.67
3906	0550588650101015	ECLIPSE MEDICAL IMAGING PC	10/5/2017	NF-3 Bill Form / HCFA 1500 Form	8/22/2017	72148	\$ 912.00
3907	0550588650101015	ECLIPSE MEDICAL IMAGING PC	10/5/2017	NF-3 Bill Form / HCFA 1500 Form	8/22/2017	72141	\$ 659.79
3908	0422861110101040	ECLIPSE MEDICAL IMAGING PC	10/6/2017	NF-3 Bill Form / HCFA 1500 Form	8/24/2017	73221	\$ 878.67
3909	0594477470101017	ECLIPSE MEDICAL IMAGING PC	10/6/2017	NF-3 Bill Form / HCFA 1500 Form	8/24/2017	73221	\$ 878.67
3910	0241954760101052	ECLIPSE MEDICAL IMAGING PC	10/6/2017	NF-3 Bill Form / HCFA 1500 Form	8/24/2017	73070	\$ 70.36
3911	0549653270101029	ECLIPSE MEDICAL IMAGING PC	10/9/2017	NF-3 Bill Form / HCFA 1500 Form	8/24/2017	72141	\$ 659.79
3912	0549653270101029	ECLIPSE MEDICAL IMAGING PC	10/9/2017	NF-3 Bill Form / HCFA 1500 Form	8/24/2017	72040	\$ 72.20
3913	0549653270101029	ECLIPSE MEDICAL IMAGING PC	10/9/2017	NF-3 Bill Form / HCFA 1500 Form	8/24/2017	72100	\$ 65.86
3914	0549653270101029	ECLIPSE MEDICAL IMAGING PC	10/9/2017	NF-3 Bill Form / HCFA 1500 Form	8/24/2017	73030	\$ 71.02
3915	0549653270101029	ECLIPSE MEDICAL IMAGING PC	10/9/2017	NF-3 Bill Form / HCFA 1500 Form	8/24/2017	72148	\$ 912.00
3916	0414169020101047	ECLIPSE MEDICAL IMAGING PC	10/9/2017	NF-3 Bill Form / HCFA 1500 Form	8/24/2017	72148	\$ 912.00
3917	0422861110101040	ECLIPSE MEDICAL IMAGING PC	10/10/2017	NF-3 Bill Form / HCFA 1500 Form	8/24/2017	73721	\$ 878.67
3918	0562298540101029	ECLIPSE MEDICAL IMAGING PC	10/10/2017	NF-3 Bill Form / HCFA 1500 Form	8/25/2017	72148	\$ 912.00
3919	0562298540101029	ECLIPSE MEDICAL IMAGING PC	10/10/2017	NF-3 Bill Form / HCFA 1500 Form	8/25/2017	73221	\$ 659.00
3920	0560603620101033	ECLIPSE MEDICAL IMAGING PC	10/10/2017	NF-3 Bill Form / HCFA 1500 Form	8/27/2017	73721	\$ 878.67

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Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
3921	0547804620101027	ECLIPSE MEDICAL IMAGING PC	10/10/2017	NF-3 Bill Form / HCFA 1500 Form	8/28/2017	73721	\$ 878.67
3922	0175203490101127	ECLIPSE MEDICAL IMAGING PC	10/10/2017	NF-3 Bill Form / HCFA 1500 Form	8/28/2017	73100	\$ 61.89
3923	0175203490101127	ECLIPSE MEDICAL IMAGING PC	10/10/2017	NF-3 Bill Form / HCFA 1500 Form	8/28/2017	73560	\$ 55.54
3924	0175203490101127	ECLIPSE MEDICAL IMAGING PC	10/10/2017	NF-3 Bill Form / HCFA 1500 Form	8/28/2017	73030	\$ 71.02
3925	0175203490101127	ECLIPSE MEDICAL IMAGING PC	10/10/2017	NF-3 Bill Form / HCFA 1500 Form	8/28/2017	73070	\$ 52.77
3926	0175203490101127	ECLIPSE MEDICAL IMAGING PC	10/10/2017	NF-3 Bill Form / HCFA 1500 Form	8/28/2017	72040	\$ 96.27
3927	0175203490101127	ECLIPSE MEDICAL IMAGING PC	10/10/2017	NF-3 Bill Form / HCFA 1500 Form	8/28/2017	73070	\$ 52.77
3928	0577758350101032	ECLIPSE MEDICAL IMAGING PC	10/10/2017	NF-3 Bill Form / HCFA 1500 Form	8/25/2017	72148	\$ 912.00
3929	0577758350101032	ECLIPSE MEDICAL IMAGING PC	10/10/2017	NF-3 Bill Form / HCFA 1500 Form	8/25/2017	72141	\$ 659.79
3930	0557753750101017	ECLIPSE MEDICAL IMAGING PC	10/10/2017	NF-3 Bill Form / HCFA 1500 Form	8/27/2017	72141	\$ 659.79
3931	0557753750101017	ECLIPSE MEDICAL IMAGING PC	10/10/2017	NF-3 Bill Form / HCFA 1500 Form	8/27/2017	72148	\$ 912.00
3932	0414169020101047	ECLIPSE MEDICAL IMAGING PC	10/10/2017	NF-3 Bill Form / HCFA 1500 Form	8/28/2017	73221	\$ 878.67
3933	0166983200101068	ECLIPSE MEDICAL IMAGING PC	10/12/2017	NF-3 Bill Form / HCFA 1500 Form	8/28/2017	72148	\$ 912.00
3934	0166983200101068	ECLIPSE MEDICAL IMAGING PC	10/12/2017	NF-3 Bill Form / HCFA 1500 Form	8/28/2017	72141	\$ 659.79
3935	0175203490101127	ECLIPSE MEDICAL IMAGING PC	10/16/2017	NF-3 Bill Form / HCFA 1500 Form	9/3/2017	72141	\$ 659.79
3936	0175203490101127	ECLIPSE MEDICAL IMAGING PC	10/16/2017	NF-3 Bill Form / HCFA 1500 Form	9/3/2017	72148	\$ 912.00
3937	05775849230101037	ECLIPSE MEDICAL IMAGING PC	10/16/2017	NF-3 Bill Form / HCFA 1500 Form	8/31/2017	72141	\$ 659.79
3938	0575849230101037	ECLIPSE MEDICAL IMAGING PC	10/16/2017	NF-3 Bill Form / HCFA 1500 Form	8/31/2017	72148	\$ 912.00
3939	0132253290101191	ECLIPSE MEDICAL IMAGING PC	10/16/2017	NF-3 Bill Form / HCFA 1500 Form	8/29/2017	72148	\$ 912.00
3940	0533560600101025	ECLIPSE MEDICAL IMAGING PC	10/16/2017	NF-3 Bill Form / HCFA 1500 Form	9/1/2017	73221	\$ 878.67
3941	0533560600101025	ECLIPSE MEDICAL IMAGING PC	10/16/2017	NF-3 Bill Form / HCFA 1500 Form	9/1/2017	73721	\$ 659.00
3942	0299246840101017	ECLIPSE MEDICAL IMAGING PC	10/16/2017	NF-3 Bill Form / HCFA 1500 Form	8/31/2017	72040	\$ 72.20
3943	0299246840101017	ECLIPSE MEDICAL IMAGING PC	10/16/2017	NF-3 Bill Form / HCFA 1500 Form	8/31/2017	72100	\$ 65.86
3944	0299246840101017	ECLIPSE MEDICAL IMAGING PC	10/16/2017	NF-3 Bill Form / HCFA 1500 Form	8/31/2017	73221	\$ 878.67
3945	0299246840101017	ECLIPSE MEDICAL IMAGING PC	10/16/2017	NF-3 Bill Form / HCFA 1500 Form	8/31/2017	73070	\$ 52.77
3946	0561656220101034	ECLIPSE MEDICAL IMAGING PC	10/16/2017	NF-3 Bill Form / HCFA 1500 Form	9/1/2017	72148	\$ 912.00
3947	0408743650101051	ECLIPSE MEDICAL IMAGING PC	10/16/2017	NF-3 Bill Form / HCFA 1500 Form	8/31/2017	73700	\$ 486.68
3948	0562298540101029	ECLIPSE MEDICAL IMAGING PC	10/16/2017	NF-3 Bill Form / HCFA 1500 Form	8/29/2017	72141	\$ 879.73
3949	0132253290101191	ECLIPSE MEDICAL IMAGING PC	10/16/2017	NF-3 Bill Form / HCFA 1500 Form	8/22/2017	72141	\$ 879.73
3950	0454363160101013	ECLIPSE MEDICAL IMAGING PC	10/16/2017	NF-3 Bill Form / HCFA 1500 Form	8/29/2017	72141	\$ 659.79
3951	0454363160101013	ECLIPSE MEDICAL IMAGING PC	10/16/2017	NF-3 Bill Form / HCFA 1500 Form	8/29/2017	72148	\$ 912.00
3952	0563725100101022	ECLIPSE MEDICAL IMAGING PC	10/16/2017	NF-3 Bill Form / HCFA 1500 Form	8/30/2017	73721	\$ 878.67
3953	0561656220101034	ECLIPSE MEDICAL IMAGING PC	10/16/2017	NF-3 Bill Form / HCFA 1500 Form	8/30/2017	73600	\$ 54.75
3954	0561656220101034	ECLIPSE MEDICAL IMAGING PC	10/16/2017	NF-3 Bill Form / HCFA 1500 Form	8/30/2017	73721	\$ 659.00
3955	0561656220101034	ECLIPSE MEDICAL IMAGING PC	10/16/2017	NF-3 Bill Form / HCFA 1500 Form	8/30/2017	72040	\$ 72.20
3956	0561656220101034	ECLIPSE MEDICAL IMAGING PC	10/16/2017	NF-3 Bill Form / HCFA 1500 Form	8/30/2017	72141	\$ 879.73
3957	0561656220101034	ECLIPSE MEDICAL IMAGING PC	10/16/2017	NF-3 Bill Form / HCFA 1500 Form	8/30/2017	73560	\$ 55.54
3958	0561656220101034	ECLIPSE MEDICAL IMAGING PC	10/16/2017	NF-3 Bill Form / HCFA 1500 Form	8/30/2017	72100	\$ 65.86
3959	0440646190101020	ECLIPSE MEDICAL IMAGING PC	10/16/2017	NF-3 Bill Form / HCFA 1500 Form	8/30/2017	72141	\$ 879.73
3960	0570451240101027	ECLIPSE MEDICAL IMAGING PC	10/16/2017	NF-3 Bill Form / HCFA 1500 Form	8/30/2017	72141	\$ 879.73
3961	010609230101140	ECLIPSE MEDICAL IMAGING PC	10/16/2017	NF-3 Bill Form / HCFA 1500 Form	8/31/2017	73221	\$ 878.67
3962	0549653270101029	ECLIPSE MEDICAL IMAGING PC	10/16/2017	NF-3 Bill Form / HCFA 1500 Form	8/29/2017	73221	\$ 878.67
3963	0594477470101017	ECLIPSE MEDICAL IMAGING PC	10/16/2017	NF-3 Bill Form / HCFA 1500 Form	8/31/2017	72141	\$ 879.73
3964	0571261780101017	ECLIPSE MEDICAL IMAGING PC	10/16/2017	NF-3 Bill Form / HCFA 1500 Form	9/1/2017	72148	\$ 912.00
3965	0571261780101017	ECLIPSE MEDICAL IMAGING PC	10/16/2017	NF-3 Bill Form / HCFA 1500 Form	9/1/2017	73721	\$ 659.00
3966	0533560600101025	ECLIPSE MEDICAL IMAGING PC	10/19/2017	NF-3 Bill Form / HCFA 1500 Form	9/5/2017	73718	\$ 901.42
3967	0241954760101052	ECLIPSE MEDICAL IMAGING PC	10/19/2017	NF-3 Bill Form / HCFA 1500 Form	9/5/2017	72148	\$ 912.00
3968	0241954760101052	ECLIPSE MEDICAL IMAGING PC	10/19/2017	NF-3 Bill Form / HCFA 1500 Form	9/5/2017	72141	\$ 659.79
3969	0570451240101027	ECLIPSE MEDICAL IMAGING PC	10/19/2017	NF-3 Bill Form / HCFA 1500 Form	9/5/2017	72148	\$ 912.00
3970	0182048460101040	ECLIPSE MEDICAL IMAGING PC	10/19/2017	NF-3 Bill Form / HCFA 1500 Form	9/5/2017	72148	\$ 912.00
3971	0435540130101033	ECLIPSE MEDICAL IMAGING PC	10/19/2017	NF-3 Bill Form / HCFA 1500 Form	9/5/2017	72100	\$ 65.86
3972	0435540130101033	ECLIPSE MEDICAL IMAGING PC	10/19/2017	NF-3 Bill Form / HCFA 1500 Form	9/5/2017	72070	\$ 69.82
3973	0435540130101033	ECLIPSE MEDICAL IMAGING PC	10/19/2017	NF-3 Bill Form / HCFA 1500 Form	9/5/2017	72141	\$ 879.73
3974	0440646190101020	ECLIPSE MEDICAL IMAGING PC	10/19/2017	NF-3 Bill Form / HCFA 1500 Form	9/5/2017	72148	\$ 912.00
3975	0260368260101189	ECLIPSE MEDICAL IMAGING PC	10/19/2017	NF-3 Bill Form / HCFA 1500 Form	9/6/2017	73221	\$ 878.67
3976	0175796370101109	ECLIPSE MEDICAL IMAGING PC	10/20/2017	NF-3 Bill Form / HCFA 1500 Form	9/6/2017	72141	\$ 659.79
3977	0175796370101109	ECLIPSE MEDICAL IMAGING PC	10/20/2017	NF-3 Bill Form / HCFA 1500 Form	9/6/2017	72148	\$ 912.00
3978	0132253290101191	ECLIPSE MEDICAL IMAGING PC	10/20/2017	NF-3 Bill Form / HCFA 1500 Form	9/6/2017	72146	\$ 959.61
3979	0560603620101033	ECLIPSE MEDICAL IMAGING PC	10/20/2017	NF-3 Bill Form / HCFA 1500 Form	9/6/2017	72141	\$ 659.79
3980	0560603620101033	ECLIPSE MEDICAL IMAGING PC	10/20/2017	NF-3 Bill Form / HCFA 1500 Form	9/6/2017	72148	\$ 912.00
3981	0438750040101059	ECLIPSE MEDICAL IMAGING PC	10/23/2017	NF-3 Bill Form / HCFA 1500 Form	9/7/2017	72148	\$ 912.00
3982	0438750040101059	ECLIPSE MEDICAL IMAGING PC	10/23/2017	NF-3 Bill Form / HCFA 1500 Form	9/7/2017	72141	\$ 659.79
3983	0376304830101038	ECLIPSE MEDICAL IMAGING PC	10/23/2017	NF-3 Bill Form / HCFA 1500 Form	9/7/2017	73721	\$ 878.67
3984	0391969930101152	ECLIPSE MEDICAL IMAGING PC	10/23/2017	NF-3 Bill Form / HCFA 1500 Form	9/7/2017	73721	\$ 878.67
3985	0379603270101045	ECLIPSE MEDICAL IMAGING PC	10/23/2017	NF-3 Bill Form / HCFA 1500 Form	9/7/2017	72148	\$ 912.00
3986	0379603270101045	ECLIPSE MEDICAL IMAGING PC	10/23/2017	NF-3 Bill Form / HCFA 1500 Form	9/7/2017	72141	\$ 659.79
3987	0572035920101031	ECLIPSE MEDICAL IMAGING PC	10/23/2017	NF-3 Bill Form / HCFA 1500 Form	9/10/2017	72148	\$ 912.00
3988	0572035920101031	ECLIPSE MEDICAL IMAGING PC	10/23/2017	NF-3 Bill Form / HCFA 1500 Form	9/10/2017	72141	\$ 659.79
3989	0559204320101028	ECLIPSE MEDICAL IMAGING PC	10/23/2017	NF-3 Bill Form / HCFA 1500 Form	9/8/2017	73221	\$ 878.67
3990	0376304830101038	ECLIPSE MEDICAL IMAGING PC	10/23/2017	NF-3 Bill Form / HCFA 1500 Form	9/7/2017	73221	\$ 878.67

Government Employees Insurance Company, et al v. Eclipse Medical Imaging, et al
Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
3991	0586933250101015	ECLIPSE MEDICAL IMAGING PC	10/23/2017	NF-3 Bill Form / HCFA 1500 Form	9/10/2017	73721	\$ 878.67
3992	0175796370101109	ECLIPSE MEDICAL IMAGING PC	10/23/2017	NF-3 Bill Form / HCFA 1500 Form	9/8/2017	72146	\$ 959.61
3993	0547804620101027	ECLIPSE MEDICAL IMAGING PC	10/23/2017	NF-3 Bill Form / HCFA 1500 Form	9/8/2017	72148	\$ 912.00
3994	0547804620101027	ECLIPSE MEDICAL IMAGING PC	10/23/2017	NF-3 Bill Form / HCFA 1500 Form	9/8/2017	72141	\$ 659.79
3995	0246116197010104	ECLIPSE MEDICAL IMAGING PC	10/23/2017	NF-3 Bill Form / HCFA 1500 Form	9/10/2017	72141	\$ 879.73
3996	0560603620101033	ECLIPSE MEDICAL IMAGING PC	10/24/2017	NF-3 Bill Form / HCFA 1500 Form	9/11/2017	72141	\$ 659.79
3997	0560603620101033	ECLIPSE MEDICAL IMAGING PC	10/24/2017	NF-3 Bill Form / HCFA 1500 Form	9/11/2017	72148	\$ 912.00
3998	0485077830101012	ECLIPSE MEDICAL IMAGING PC	10/24/2017	NF-3 Bill Form / HCFA 1500 Form	9/11/2017	73721	\$ 878.67
3999	0260368260101189	ECLIPSE MEDICAL IMAGING PC	10/25/2017	NF-3 Bill Form / HCFA 1500 Form	9/11/2017	73221	\$ 878.67
4000	0376304830101038	ECLIPSE MEDICAL IMAGING PC	10/26/2017	NF-3 Bill Form / HCFA 1500 Form	9/12/2017	73221	\$ 878.67
4001	0468286480101013	ECLIPSE MEDICAL IMAGING PC	10/26/2017	NF-3 Bill Form / HCFA 1500 Form	9/11/2017	73221	\$ 659.00
4002	0468286480101013	ECLIPSE MEDICAL IMAGING PC	10/26/2017	NF-3 Bill Form / HCFA 1500 Form	9/11/2017	72148	\$ 912.00
4003	0296811650101069	ECLIPSE MEDICAL IMAGING PC	10/26/2017	NF-3 Bill Form / HCFA 1500 Form	9/12/2017	73721	\$ 878.67
4004	0386276740101050	ECLIPSE MEDICAL IMAGING PC	10/26/2017	NF-3 Bill Form / HCFA 1500 Form	9/12/2017	73221	\$ 659.00
4005	0386276740101050	ECLIPSE MEDICAL IMAGING PC	10/26/2017	NF-3 Bill Form / HCFA 1500 Form	9/12/2017	73721	\$ 878.67
4006	0521169530101032	ECLIPSE MEDICAL IMAGING PC	10/26/2017	NF-3 Bill Form / HCFA 1500 Form	9/12/2017	73721	\$ 878.67
4007	0521169530101032	ECLIPSE MEDICAL IMAGING PC	10/26/2017	NF-3 Bill Form / HCFA 1500 Form	9/12/2017	73221	\$ 878.67
4008	0422861110101040	ECLIPSE MEDICAL IMAGING PC	10/27/2017	NF-3 Bill Form / HCFA 1500 Form	9/13/2017	73221	\$ 878.67
4009	0549347330101083	ECLIPSE MEDICAL IMAGING PC	10/27/2017	NF-3 Bill Form / HCFA 1500 Form	9/13/2017	73221	\$ 659.00
4010	0549347330101083	ECLIPSE MEDICAL IMAGING PC	10/27/2017	NF-3 Bill Form / HCFA 1500 Form	9/13/2017	72148	\$ 912.00
4011	0549033990101015	ECLIPSE MEDICAL IMAGING PC	10/27/2017	NF-3 Bill Form / HCFA 1500 Form	9/13/2017	72148	\$ 912.00
4012	0549033990101015	ECLIPSE MEDICAL IMAGING PC	10/27/2017	NF-3 Bill Form / HCFA 1500 Form	9/13/2017	72141	\$ 659.79
4013	0435540130101033	ECLIPSE MEDICAL IMAGING PC	10/27/2017	NF-3 Bill Form / HCFA 1500 Form	9/13/2017	72146	\$ 959.61
4014	0422861110101040	ECLIPSE MEDICAL IMAGING PC	10/27/2017	NF-3 Bill Form / HCFA 1500 Form	9/13/2017	72148	\$ 912.00
4015	0422861110101040	ECLIPSE MEDICAL IMAGING PC	10/27/2017	NF-3 Bill Form / HCFA 1500 Form	9/13/2017	72141	\$ 659.79
4016	0567867410101023	ECLIPSE MEDICAL IMAGING PC	10/27/2017	NF-3 Bill Form / HCFA 1500 Form	9/13/2017	73221	\$ 878.67
4017	0521169530101032	ECLIPSE MEDICAL IMAGING PC	10/30/2017	NF-3 Bill Form / HCFA 1500 Form	9/17/2017	73221	\$ 878.67
4018	0535045430101047	ECLIPSE MEDICAL IMAGING PC	10/30/2017	NF-3 Bill Form / HCFA 1500 Form	9/17/2017	72141	\$ 879.73
4019	0260368260101189	ECLIPSE MEDICAL IMAGING PC	10/30/2017	NF-3 Bill Form / HCFA 1500 Form	9/18/2017	72141	\$ 879.73
4020	0527816850101034	ECLIPSE MEDICAL IMAGING PC	10/30/2017	NF-3 Bill Form / HCFA 1500 Form	9/14/2017	72141	\$ 879.73
4021	0535045430101047	ECLIPSE MEDICAL IMAGING PC	10/30/2017	NF-3 Bill Form / HCFA 1500 Form	9/17/2017	72141	\$ 879.73
4022	0562034580101029	ECLIPSE MEDICAL IMAGING PC	10/30/2017	NF-3 Bill Form / HCFA 1500 Form	9/18/2017	72141	\$ 879.73
4023	0559204320101028	ECLIPSE MEDICAL IMAGING PC	10/30/2017	NF-3 Bill Form / HCFA 1500 Form	9/15/2017	72148	\$ 912.00
4024	0559204320101028	ECLIPSE MEDICAL IMAGING PC	10/30/2017	NF-3 Bill Form / HCFA 1500 Form	9/15/2017	72141	\$ 659.79
4025	0574789750101010	ECLIPSE MEDICAL IMAGING PC	10/30/2017	NF-3 Bill Form / HCFA 1500 Form	9/15/2017	72141	\$ 879.73
4026	0549347330101083	ECLIPSE MEDICAL IMAGING PC	10/30/2017	NF-3 Bill Form / HCFA 1500 Form	9/15/2017	72141	\$ 879.73
4027	0405339080101036	ECLIPSE MEDICAL IMAGING PC	10/30/2017	NF-3 Bill Form / HCFA 1500 Form	9/15/2017	72148	\$ 912.00
4028	0405339080101036	ECLIPSE MEDICAL IMAGING PC	10/30/2017	NF-3 Bill Form / HCFA 1500 Form	9/15/2017	72141	\$ 659.79
4029	0435540130101033	ECLIPSE MEDICAL IMAGING PC	10/30/2017	NF-3 Bill Form / HCFA 1500 Form	9/18/2017	72148	\$ 912.00
4030	0533560600101025	ECLIPSE MEDICAL IMAGING PC	10/30/2017	NF-3 Bill Form / HCFA 1500 Form	9/18/2017	72148	\$ 912.00
4031	0533560600101025	ECLIPSE MEDICAL IMAGING PC	10/30/2017	NF-3 Bill Form / HCFA 1500 Form	9/18/2017	72141	\$ 659.79
4032	0547804620101027	ECLIPSE MEDICAL IMAGING PC	10/30/2017	NF-3 Bill Form / HCFA 1500 Form	9/14/2017	72146	\$ 959.61
4033	0562034580101029	ECLIPSE MEDICAL IMAGING PC	10/30/2017	NF-3 Bill Form / HCFA 1500 Form	9/14/2017	73721	\$ 878.67
4034	0595774910101014	ECLIPSE MEDICAL IMAGING PC	10/30/2017	NF-3 Bill Form / HCFA 1500 Form	9/14/2017	72148	\$ 912.00
4035	0514538930101041	ECLIPSE MEDICAL IMAGING PC	10/30/2017	NF-3 Bill Form / HCFA 1500 Form	9/17/2017	72141	\$ 659.79
4036	0514538930101041	ECLIPSE MEDICAL IMAGING PC	10/30/2017	NF-3 Bill Form / HCFA 1500 Form	9/17/2017	72148	\$ 912.00
4037	0528308020101036	ECLIPSE MEDICAL IMAGING PC	10/31/2017	NF-3 Bill Form / HCFA 1500 Form	9/14/2017	72141	\$ 879.73
4038	0458968500101055	ECLIPSE MEDICAL IMAGING PC	11/2/2017	NF-3 Bill Form / HCFA 1500 Form	9/19/2017	73221	\$ 878.67
4039	0187652240101017	ECLIPSE MEDICAL IMAGING PC	11/2/2017	NF-3 Bill Form / HCFA 1500 Form	9/19/2017	73718	\$ 901.42
4040	0591793690101022	ECLIPSE MEDICAL IMAGING PC	11/2/2017	NF-3 Bill Form / HCFA 1500 Form	9/19/2017	73721	\$ 878.67
4041	0574789750101010	ECLIPSE MEDICAL IMAGING PC	11/2/2017	NF-3 Bill Form / HCFA 1500 Form	9/18/2017	72148	\$ 912.00
4042	0405981230101067	ECLIPSE MEDICAL IMAGING PC	11/3/2017	NF-3 Bill Form / HCFA 1500 Form	9/21/2017	72148	\$ 912.00
4043	0405981230101067	ECLIPSE MEDICAL IMAGING PC	11/3/2017	NF-3 Bill Form / HCFA 1500 Form	9/21/2017	72141	\$ 659.79
4044	0527816850101034	ECLIPSE MEDICAL IMAGING PC	11/3/2017	NF-3 Bill Form / HCFA 1500 Form	9/21/2017	72148	\$ 912.00
4045	0426330490101034	ECLIPSE MEDICAL IMAGING PC	11/3/2017	NF-3 Bill Form / HCFA 1500 Form	9/20/2017	72148	\$ 912.00
4046	0376304830101038	ECLIPSE MEDICAL IMAGING PC	11/3/2017	NF-3 Bill Form / HCFA 1500 Form	9/20/2017	72141	\$ 659.79
4047	0376304830101038	ECLIPSE MEDICAL IMAGING PC	11/3/2017	NF-3 Bill Form / HCFA 1500 Form	9/20/2017	72148	\$ 912.00
4048	0528308020101036	ECLIPSE MEDICAL IMAGING PC	11/6/2017	NF-3 Bill Form / HCFA 1500 Form	9/25/2017	72141	\$ 659.79
4049	0528308020101036	ECLIPSE MEDICAL IMAGING PC	11/6/2017	NF-3 Bill Form / HCFA 1500 Form	9/25/2017	72148	\$ 912.00
4050	0271068680101044	ECLIPSE MEDICAL IMAGING PC	11/6/2017	NF-3 Bill Form / HCFA 1500 Form	9/21/2017	70160	\$ 50.78
4051	0271068680101044	ECLIPSE MEDICAL IMAGING PC	11/6/2017	NF-3 Bill Form / HCFA 1500 Form	9/21/2017	73560	\$ 74.06
4052	0026530680101124	ECLIPSE MEDICAL IMAGING PC	11/6/2017	NF-3 Bill Form / HCFA 1500 Form	9/22/2017	73070	\$ 52.77
4053	0026530680101124	ECLIPSE MEDICAL IMAGING PC	11/6/2017	NF-3 Bill Form / HCFA 1500 Form	9/22/2017	73030	\$ 71.02
4054	0026530680101124	ECLIPSE MEDICAL IMAGING PC	11/6/2017	NF-3 Bill Form / HCFA 1500 Form	9/22/2017	73221	\$ 878.67
4055	0026530680101124	ECLIPSE MEDICAL IMAGING PC	11/6/2017	NF-3 Bill Form / HCFA 1500 Form	9/22/2017	73221	\$ 659.00
4056	0568151190101027	ECLIPSE MEDICAL IMAGING PC	11/6/2017	NF-3 Bill Form / HCFA 1500 Form	9/25/2017	73221	\$ 878.67
4057	0535045430101047	ECLIPSE MEDICAL IMAGING PC	11/6/2017	NF-3 Bill Form / HCFA 1500 Form	9/24/2017	72148	\$ 912.00
4058	0562034580101029	ECLIPSE MEDICAL IMAGING PC	11/6/2017	NF-3 Bill Form / HCFA 1500 Form	9/24/2017	72148	\$ 912.00
4059	0562034580101029	ECLIPSE MEDICAL IMAGING PC	11/6/2017	NF-3 Bill Form / HCFA 1500 Form	9/24/2017	72141	\$ 659.79
4060	0256031160101131	ECLIPSE MEDICAL IMAGING PC	11/6/2017	NF-3 Bill Form / HCFA 1500 Form	9/25/2017	73721	\$ 878.67

Government Employees Insurance Company, et al v. Eclipse Medical Imaging, et al
Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
4061	0409248370101034	ECLIPSE MEDICAL IMAGING PC	11/6/2017	NF-3 Bill Form / HCFA 1500 Form	9/24/2017	72141	\$ 879.73
4062	0568151190101027	ECLIPSE MEDICAL IMAGING PC	11/6/2017	NF-3 Bill Form / HCFA 1500 Form	9/25/2017	73721	\$ 878.67
4063	0547804620101027	ECLIPSE MEDICAL IMAGING PC	11/6/2017	NF-3 Bill Form / HCFA 1500 Form	9/22/2017	72148	\$ 912.00
4064	0547804620101027	ECLIPSE MEDICAL IMAGING PC	11/6/2017	NF-3 Bill Form / HCFA 1500 Form	9/22/2017	72141	\$ 659.79
4065	0528308020101036	ECLIPSE MEDICAL IMAGING PC	11/6/2017	NF-3 Bill Form / HCFA 1500 Form	9/22/2017	73140	\$ 40.06
4066	0528308020101036	ECLIPSE MEDICAL IMAGING PC	11/6/2017	NF-3 Bill Form / HCFA 1500 Form	9/22/2017	72141	\$ 659.79
4067	0528308020101036	ECLIPSE MEDICAL IMAGING PC	11/6/2017	NF-3 Bill Form / HCFA 1500 Form	9/22/2017	72148	\$ 912.00
4068	0376304830101038	ECLIPSE MEDICAL IMAGING PC	11/6/2017	NF-3 Bill Form / HCFA 1500 Form	9/22/2017	72148	\$ 912.00
4069	0376304830101038	ECLIPSE MEDICAL IMAGING PC	11/6/2017	NF-3 Bill Form / HCFA 1500 Form	9/22/2017	72141	\$ 659.79
4070	0543912070101019	ECLIPSE MEDICAL IMAGING PC	11/7/2017	NF-3 Bill Form / HCFA 1500 Form	9/26/2017	72141	\$ 659.79
4071	0543912070101019	ECLIPSE MEDICAL IMAGING PC	11/7/2017	NF-3 Bill Form / HCFA 1500 Form	9/26/2017	72148	\$ 912.00
4072	0478358160101064	ECLIPSE MEDICAL IMAGING PC	11/7/2017	NF-3 Bill Form / HCFA 1500 Form	9/26/2017	72148	\$ 912.00
4073	0478358160101064	ECLIPSE MEDICAL IMAGING PC	11/7/2017	NF-3 Bill Form / HCFA 1500 Form	9/26/2017	72141	\$ 659.79
4074	0026530680101124	ECLIPSE MEDICAL IMAGING PC	11/7/2017	NF-3 Bill Form / HCFA 1500 Form	9/26/2017	72148	\$ 912.00
4075	0434676080101044	ECLIPSE MEDICAL IMAGING PC	9/26/2017	NF-3 Bill Form / HCFA 1500 Form	2/22/2017	73221	\$ 878.67
4076	0434676080101044	ECLIPSE MEDICAL IMAGING PC	9/26/2017	NF-3 Bill Form / HCFA 1500 Form	2/22/2017	73221	\$ 659.00
4077	0299246840101017	ECLIPSE MEDICAL IMAGING PC	11/10/2017	NF-3 Bill Form / HCFA 1500 Form	9/27/2017	72141	\$ 659.79
4078	0299246840101017	ECLIPSE MEDICAL IMAGING PC	11/10/2017	NF-3 Bill Form / HCFA 1500 Form	9/27/2017	72148	\$ 912.00
4079	0519497090101082	ECLIPSE MEDICAL IMAGING PC	11/10/2017	NF-3 Bill Form / HCFA 1500 Form	9/27/2017	73721	\$ 878.67
4080	0603142940101026	ECLIPSE MEDICAL IMAGING PC	11/10/2017	NF-3 Bill Form / HCFA 1500 Form	9/27/2017	73721	\$ 878.67
4081	0528308020101036	ECLIPSE MEDICAL IMAGING PC	11/10/2017	NF-3 Bill Form / HCFA 1500 Form	9/27/2017	72148	\$ 912.00
4082	0608474530101016	ECLIPSE MEDICAL IMAGING PC	11/10/2017	NF-3 Bill Form / HCFA 1500 Form	9/27/2017	73721	\$ 878.67
4083	0187652240101017	ECLIPSE MEDICAL IMAGING PC	11/13/2017	NF-3 Bill Form / HCFA 1500 Form	10/1/2017	72148	\$ 912.00
4084	0187652240101017	ECLIPSE MEDICAL IMAGING PC	11/13/2017	NF-3 Bill Form / HCFA 1500 Form	10/1/2017	72141	\$ 659.79
4085	0409248370101034	ECLIPSE MEDICAL IMAGING PC	11/13/2017	NF-3 Bill Form / HCFA 1500 Form	10/1/2017	72148	\$ 912.00
4086	0297127400101021	ECLIPSE MEDICAL IMAGING PC	11/13/2017	NF-3 Bill Form / HCFA 1500 Form	9/29/2017	72141	\$ 879.73
4087	0562034580101029	ECLIPSE MEDICAL IMAGING PC	11/13/2017	NF-3 Bill Form / HCFA 1500 Form	10/2/2017	72148	\$ 912.00
4088	0486427310101017	ECLIPSE MEDICAL IMAGING PC	11/13/2017	NF-3 Bill Form / HCFA 1500 Form	10/2/2017	72148	\$ 912.00
4089	0488119170101074	ECLIPSE MEDICAL IMAGING PC	11/13/2017	NF-3 Bill Form / HCFA 1500 Form	9/28/2017	73721	\$ 878.67
4090	0561586430101054	ECLIPSE MEDICAL IMAGING PC	11/14/2017	NF-3 Bill Form / HCFA 1500 Form	9/28/2017	73721	\$ 878.67
4091	0386276740101050	ECLIPSE MEDICAL IMAGING PC	11/14/2017	NF-3 Bill Form / HCFA 1500 Form	9/28/2017	72141	\$ 659.79
4092	0386276740101050	ECLIPSE MEDICAL IMAGING PC	11/14/2017	NF-3 Bill Form / HCFA 1500 Form	9/28/2017	73110	\$ 52.77
4093	0386276740101050	ECLIPSE MEDICAL IMAGING PC	11/14/2017	NF-3 Bill Form / HCFA 1500 Form	9/28/2017	72148	\$ 912.00
4094	0533560600101025	ECLIPSE MEDICAL IMAGING PC	11/16/2017	NF-3 Bill Form / HCFA 1500 Form	10/3/2017	72148	\$ 912.00
4095	0533560600101025	ECLIPSE MEDICAL IMAGING PC	11/16/2017	NF-3 Bill Form / HCFA 1500 Form	10/3/2017	72141	\$ 659.79
4096	0458968500101055	ECLIPSE MEDICAL IMAGING PC	11/16/2017	NF-3 Bill Form / HCFA 1500 Form	10/3/2017	72141	\$ 659.79
4097	0458968500101055	ECLIPSE MEDICAL IMAGING PC	11/16/2017	NF-3 Bill Form / HCFA 1500 Form	10/3/2017	72148	\$ 912.00
4098	0535076120101039	ECLIPSE MEDICAL IMAGING PC	11/20/2017	NF-3 Bill Form / HCFA 1500 Form	10/5/2017	73221	\$ 878.67
4099	0451041510101015	ECLIPSE MEDICAL IMAGING PC	11/20/2017	NF-3 Bill Form / HCFA 1500 Form	10/5/2017	72141	\$ 659.79
4100	0451041510101015	ECLIPSE MEDICAL IMAGING PC	11/20/2017	NF-3 Bill Form / HCFA 1500 Form	10/5/2017	72148	\$ 912.00
4101	0426330490101034	ECLIPSE MEDICAL IMAGING PC	11/20/2017	NF-3 Bill Form / HCFA 1500 Form	10/4/2017	73030	\$ 71.02
4102	0426330490101034	ECLIPSE MEDICAL IMAGING PC	11/20/2017	NF-3 Bill Form / HCFA 1500 Form	10/4/2017	72141	\$ 879.73
4103	0426330490101034	ECLIPSE MEDICAL IMAGING PC	11/20/2017	NF-3 Bill Form / HCFA 1500 Form	10/4/2017	73560	\$ 55.54
4104	0391969930101152	ECLIPSE MEDICAL IMAGING PC	11/20/2017	NF-3 Bill Form / HCFA 1500 Form	10/4/2017	72148	\$ 912.00
4105	0391969930101152	ECLIPSE MEDICAL IMAGING PC	11/20/2017	NF-3 Bill Form / HCFA 1500 Form	10/4/2017	72141	\$ 659.79
4106	0488119170101074	ECLIPSE MEDICAL IMAGING PC	11/20/2017	NF-3 Bill Form / HCFA 1500 Form	10/6/2017	73221	\$ 878.67
4107	0521169530101032	ECLIPSE MEDICAL IMAGING PC	11/20/2017	NF-3 Bill Form / HCFA 1500 Form	10/4/2017	73721	\$ 878.67
4108	0525739750101015	ECLIPSE MEDICAL IMAGING PC	11/20/2017	NF-3 Bill Form / HCFA 1500 Form	10/4/2017	73721	\$ 878.67
4109	0579764680101039	ECLIPSE MEDICAL IMAGING PC	11/20/2017	NF-3 Bill Form / HCFA 1500 Form	10/4/2017	72141	\$ 659.79
4110	0579764680101039	ECLIPSE MEDICAL IMAGING PC	11/20/2017	NF-3 Bill Form / HCFA 1500 Form	10/4/2017	72148	\$ 912.00
4111	0414169020101047	ECLIPSE MEDICAL IMAGING PC	11/20/2017	NF-3 Bill Form / HCFA 1500 Form	10/4/2017	71020	\$ 78.29
4112	0555701830101012	ECLIPSE MEDICAL IMAGING PC	11/20/2017	NF-3 Bill Form / HCFA 1500 Form	10/4/2017	73200	\$ 486.68
4113	0551190780101012	ECLIPSE MEDICAL IMAGING PC	11/20/2017	NF-3 Bill Form / HCFA 1500 Form	10/5/2017	72141	\$ 879.73
4114	0292090370101014	ECLIPSE MEDICAL IMAGING PC	11/20/2017	NF-3 Bill Form / HCFA 1500 Form	10/8/2017	73221	\$ 878.67
4115	0376304830101038	ECLIPSE MEDICAL IMAGING PC	11/20/2017	NF-3 Bill Form / HCFA 1500 Form	10/8/2017	72148	\$ 912.00
4116	0376304830101038	ECLIPSE MEDICAL IMAGING PC	11/20/2017	NF-3 Bill Form / HCFA 1500 Form	10/8/2017	73721	\$ 659.00
4117	0320924190101083	ECLIPSE MEDICAL IMAGING PC	11/20/2017	NF-3 Bill Form / HCFA 1500 Form	10/6/2017	73221	\$ 878.67
4118	0414169020101047	ECLIPSE MEDICAL IMAGING PC	11/20/2017	NF-3 Bill Form / HCFA 1500 Form	10/4/2017	71020	\$ 78.29
4119	0501517700101022	ECLIPSE MEDICAL IMAGING PC	11/24/2017	NF-3 Bill Form / HCFA 1500 Form	10/11/2017	72148	\$ 912.00
4120	0501517700101022	ECLIPSE MEDICAL IMAGING PC	11/24/2017	NF-3 Bill Form / HCFA 1500 Form	10/11/2017	73290	\$ 60.70
4121	0501517700101022	ECLIPSE MEDICAL IMAGING PC	11/24/2017	NF-3 Bill Form / HCFA 1500 Form	10/11/2017	72141	\$ 659.79
4122	0501517700101022	ECLIPSE MEDICAL IMAGING PC	11/24/2017	NF-3 Bill Form / HCFA 1500 Form	10/11/2017	73560	\$ 55.54
4123	0026530680101124	ECLIPSE MEDICAL IMAGING PC	11/24/2017	NF-3 Bill Form / HCFA 1500 Form	10/4/2017	73721	\$ 878.67
4124	0284256310101048	ECLIPSE MEDICAL IMAGING PC	11/24/2017	NF-3 Bill Form / HCFA 1500 Form	10/11/2017	73721	\$ 878.67
4125	0422861110101040	ECLIPSE MEDICAL IMAGING PC	11/24/2017	NF-3 Bill Form / HCFA 1500 Form	10/12/2017	72148	\$ 912.00
4126	0591793690101022	ECLIPSE MEDICAL IMAGING PC	11/24/2017	NF-3 Bill Form / HCFA 1500 Form	10/12/2017	72131	\$ 581.90
4127	0591793690101022	ECLIPSE MEDICAL IMAGING PC	11/24/2017	NF-3 Bill Form / HCFA 1500 Form	10/12/2017	72125	\$ 436.42
4128	0271068680101044	ECLIPSE MEDICAL IMAGING PC	11/24/2017	NF-3 Bill Form / HCFA 1500 Form	10/12/2017	72131	\$ 581.90
4129	0271068680101044	ECLIPSE MEDICAL IMAGING PC	11/24/2017	NF-3 Bill Form / HCFA 1500 Form	10/12/2017	72125	\$ 436.42
4130	0409248370101034	ECLIPSE MEDICAL IMAGING PC	11/24/2017	NF-3 Bill Form / HCFA 1500 Form	10/10/2017	72141	\$ 659.79

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Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
4131	0409248370101034	ECLIPSE MEDICAL IMAGING PC	11/24/2017	NF-3 Bill Form / HCFA 1500 Form	10/10/2017	72148	\$ 912.00
4132	0580862120101010	ECLIPSE MEDICAL IMAGING PC	11/24/2017	NF-3 Bill Form / HCFA 1500 Form	10/13/2017	72141	\$ 879.73
4133	0568151190101027	ECLIPSE MEDICAL IMAGING PC	11/24/2017	NF-3 Bill Form / HCFA 1500 Form	10/13/2017	72141	\$ 659.79
4134	0568151190101027	ECLIPSE MEDICAL IMAGING PC	11/24/2017	NF-3 Bill Form / HCFA 1500 Form	10/13/2017	72148	\$ 912.00
4135	0320924190101083	ECLIPSE MEDICAL IMAGING PC	11/27/2017	NF-3 Bill Form / HCFA 1500 Form	10/15/2017	73221	\$ 878.67
4136	0541644250101020	ECLIPSE MEDICAL IMAGING PC	11/30/2017	NF-3 Bill Form / HCFA 1500 Form	10/16/2017	72070	\$ 69.82
4137	0541644250101020	ECLIPSE MEDICAL IMAGING PC	11/30/2017	NF-3 Bill Form / HCFA 1500 Form	10/16/2017	73070	\$ 52.77
4138	0541644250101020	ECLIPSE MEDICAL IMAGING PC	11/30/2017	NF-3 Bill Form / HCFA 1500 Form	10/16/2017	72141	\$ 659.79
4139	0541644250101020	ECLIPSE MEDICAL IMAGING PC	11/30/2017	NF-3 Bill Form / HCFA 1500 Form	10/16/2017	72148	\$ 912.00
4140	0314879190101020	ECLIPSE MEDICAL IMAGING PC	11/30/2017	NF-3 Bill Form / HCFA 1500 Form	10/19/2017	73718	\$ 901.42
4141	0486427310101017	ECLIPSE MEDICAL IMAGING PC	11/30/2017	NF-3 Bill Form / HCFA 1500 Form	10/17/2017	72141	\$ 879.73
4142	0568313670101022	ECLIPSE MEDICAL IMAGING PC	11/30/2017	NF-3 Bill Form / HCFA 1500 Form	10/17/2017	72141	\$ 659.79
4143	0568313670101022	ECLIPSE MEDICAL IMAGING PC	11/30/2017	NF-3 Bill Form / HCFA 1500 Form	10/17/2017	72146	\$ 912.00
4144	0568151190101027	ECLIPSE MEDICAL IMAGING PC	11/30/2017	NF-3 Bill Form / HCFA 1500 Form	10/16/2017	72148	\$ 912.00
4145	0568151190101027	ECLIPSE MEDICAL IMAGING PC	11/30/2017	NF-3 Bill Form / HCFA 1500 Form	10/16/2017	72141	\$ 659.79
4146	0256031160101131	ECLIPSE MEDICAL IMAGING PC	11/30/2017	NF-3 Bill Form / HCFA 1500 Form	10/16/2017	72148	\$ 912.00
4147	0165830840101183	ECLIPSE MEDICAL IMAGING PC	12/1/2017	NF-3 Bill Form / HCFA 1500 Form	10/20/2017	72148	\$ 912.00
4148	0165830840101183	ECLIPSE MEDICAL IMAGING PC	12/1/2017	NF-3 Bill Form / HCFA 1500 Form	10/20/2017	72141	\$ 659.79
4149	0521169530101032	ECLIPSE MEDICAL IMAGING PC	12/1/2017	NF-3 Bill Form / HCFA 1500 Form	10/20/2017	73721	\$ 878.67
4150	0535207400101023	ECLIPSE MEDICAL IMAGING PC	12/1/2017	NF-3 Bill Form / HCFA 1500 Form	10/20/2017	72141	\$ 659.79
4151	0535207400101023	ECLIPSE MEDICAL IMAGING PC	12/1/2017	NF-3 Bill Form / HCFA 1500 Form	10/20/2017	72148	\$ 912.00
4152	0594944240101015	ECLIPSE MEDICAL IMAGING PC	12/1/2017	NF-3 Bill Form / HCFA 1500 Form	10/19/2017	73221	\$ 878.67
4153	0271068680101044	ECLIPSE MEDICAL IMAGING PC	12/1/2017	NF-3 Bill Form / HCFA 1500 Form	10/19/2017	72128	\$ 581.90
4154	0521169530101032	ECLIPSE MEDICAL IMAGING PC	12/1/2017	NF-3 Bill Form / HCFA 1500 Form	10/20/2017	73718	\$ 901.42
4155	0535076120101039	ECLIPSE MEDICAL IMAGING PC	12/4/2017	NF-3 Bill Form / HCFA 1500 Form	10/23/2017	72141	\$ 659.79
4156	0535076120101039	ECLIPSE MEDICAL IMAGING PC	12/4/2017	NF-3 Bill Form / HCFA 1500 Form	10/23/2017	72148	\$ 912.00
4157	0131966650101201	ECLIPSE MEDICAL IMAGING PC	12/4/2017	NF-3 Bill Form / HCFA 1500 Form	10/22/2017	73221	\$ 878.67
4158	0165330670101049	ECLIPSE MEDICAL IMAGING PC	12/4/2017	NF-3 Bill Form / HCFA 1500 Form	10/24/2017	72146	\$ 959.61
4159	0567867410101023	ECLIPSE MEDICAL IMAGING PC	12/4/2017	NF-3 Bill Form / HCFA 1500 Form	10/24/2017	72148	\$ 912.00
4160	0568313670101022	ECLIPSE MEDICAL IMAGING PC	12/4/2017	NF-3 Bill Form / HCFA 1500 Form	10/24/2017	72146	\$ 959.61
4161	0583397550101021	ECLIPSE MEDICAL IMAGING PC	12/4/2017	NF-3 Bill Form / HCFA 1500 Form	10/23/2017	73221	\$ 878.67
4162	0325088790101193	ECLIPSE MEDICAL IMAGING PC	12/4/2017	NF-3 Bill Form / HCFA 1500 Form	10/23/2017	72148	\$ 912.00
4163	0432829520101106	ECLIPSE MEDICAL IMAGING PC	12/4/2017	NF-3 Bill Form / HCFA 1500 Form	10/22/2017	72141	\$ 659.79
4164	0432829520101106	ECLIPSE MEDICAL IMAGING PC	12/4/2017	NF-3 Bill Form / HCFA 1500 Form	10/22/2017	72148	\$ 912.00
4165	0591691990101017	ECLIPSE MEDICAL IMAGING PC	12/4/2017	NF-3 Bill Form / HCFA 1500 Form	10/24/2017	73721	\$ 878.67
4166	0432829520101106	ECLIPSE MEDICAL IMAGING PC	12/4/2017	NF-3 Bill Form / HCFA 1500 Form	10/22/2017	72141	\$ 659.79
4167	0432829520101106	ECLIPSE MEDICAL IMAGING PC	12/4/2017	NF-3 Bill Form / HCFA 1500 Form	10/22/2017	72148	\$ 912.00
4168	0432829520101106	ECLIPSE MEDICAL IMAGING PC	12/5/2017	NF-3 Bill Form / HCFA 1500 Form	10/22/2017	72148	\$ 912.00
4169	0124225860101017	ECLIPSE MEDICAL IMAGING PC	12/5/2017	NF-3 Bill Form / HCFA 1500 Form	10/22/2017	72148	\$ 912.00
4170	0124225860101017	ECLIPSE MEDICAL IMAGING PC	12/5/2017	NF-3 Bill Form / HCFA 1500 Form	10/22/2017	72141	\$ 659.79
4171	0284256310101048	ECLIPSE MEDICAL IMAGING PC	12/7/2017	NF-3 Bill Form / HCFA 1500 Form	10/24/2017	72148	\$ 912.00
4172	0545411870101020	ECLIPSE MEDICAL IMAGING PC	12/7/2017	NF-3 Bill Form / HCFA 1500 Form	10/25/2017	73221	\$ 659.00
4173	0545411870101020	ECLIPSE MEDICAL IMAGING PC	12/7/2017	NF-3 Bill Form / HCFA 1500 Form	10/25/2017	73721	\$ 878.67
4174	0594944240101015	ECLIPSE MEDICAL IMAGING PC	12/7/2017	NF-3 Bill Form / HCFA 1500 Form	10/24/2017	73721	\$ 878.67
4175	0092083500101022	ECLIPSE MEDICAL IMAGING PC	12/8/2017	NF-3 Bill Form / HCFA 1500 Form	10/25/2017	73221	\$ 878.67
4176	0422598040101092	ECLIPSE MEDICAL IMAGING PC	12/8/2017	NF-3 Bill Form / HCFA 1500 Form	10/23/2017	72141	\$ 879.73
4177	0422598040101092	ECLIPSE MEDICAL IMAGING PC	12/8/2017	NF-3 Bill Form / HCFA 1500 Form	10/23/2017	73721	\$ 659.00
4178	0591691990101017	ECLIPSE MEDICAL IMAGING PC	12/8/2017	NF-3 Bill Form / HCFA 1500 Form	10/24/2017	73221	\$ 878.67
4179	0570451240101027	ECLIPSE MEDICAL IMAGING PC	12/7/2017	NF-3 Bill Form / HCFA 1500 Form	8/25/2017	73721	\$ 878.67
4180	0364175980101075	ECLIPSE MEDICAL IMAGING PC	12/12/2017	NF-3 Bill Form / HCFA 1500 Form	10/27/2017	72148	\$ 912.00
4181	0534569850101030	ECLIPSE MEDICAL IMAGING PC	12/11/2017	NF-3 Bill Form / HCFA 1500 Form	10/27/2017	73721	\$ 878.67
4182	0454829370101076	ECLIPSE MEDICAL IMAGING PC	12/11/2017	NF-3 Bill Form / HCFA 1500 Form	10/30/2017	73721	\$ 878.67
4183	0209348140101066	ECLIPSE MEDICAL IMAGING PC	12/11/2017	NF-3 Bill Form / HCFA 1500 Form	10/31/2017	73221	\$ 659.00
4184	0209348140101066	ECLIPSE MEDICAL IMAGING PC	12/11/2017	NF-3 Bill Form / HCFA 1500 Form	10/31/2017	73721	\$ 878.67
4185	0299414260101160	ECLIPSE MEDICAL IMAGING PC	12/11/2017	NF-3 Bill Form / HCFA 1500 Form	10/26/2017	73221	\$ 878.67
4186	0598892480101011	ECLIPSE MEDICAL IMAGING PC	12/11/2017	NF-3 Bill Form / HCFA 1500 Form	10/26/2017	72148	\$ 912.00
4187	0209348140101066	ECLIPSE MEDICAL IMAGING PC	12/11/2017	NF-3 Bill Form / HCFA 1500 Form	10/26/2017	73221	\$ 878.67
4188	0422598040101092	ECLIPSE MEDICAL IMAGING PC	12/11/2017	NF-3 Bill Form / HCFA 1500 Form	10/29/2017	72148	\$ 912.00
4189	0512335680101087	ECLIPSE MEDICAL IMAGING PC	12/11/2017	NF-3 Bill Form / HCFA 1500 Form	10/31/2017	73221	\$ 878.67
4190	0468260470101028	ECLIPSE MEDICAL IMAGING PC	12/11/2017	NF-3 Bill Form / HCFA 1500 Form	10/31/2017	73221	\$ 878.67
4191	0608053210101015	ECLIPSE MEDICAL IMAGING PC	12/11/2017	NF-3 Bill Form / HCFA 1500 Form	10/30/2017	73221	\$ 878.67
4192	0431172890101054	ECLIPSE MEDICAL IMAGING PC	12/15/2017	NF-3 Bill Form / HCFA 1500 Form	11/2/2017	73218	\$ 765.99
4193	0568313670101022	ECLIPSE MEDICAL IMAGING PC	12/15/2017	NF-3 Bill Form / HCFA 1500 Form	11/2/2017	74176	\$ 373.47
4194	0593204790101019	ECLIPSE MEDICAL IMAGING PC	12/15/2017	NF-3 Bill Form / HCFA 1500 Form	11/2/2017	73721	\$ 659.00
4195	0593204790101019	ECLIPSE MEDICAL IMAGING PC	12/15/2017	NF-3 Bill Form / HCFA 1500 Form	11/2/2017	73221	\$ 878.67
4196	0579093130101070	ECLIPSE MEDICAL IMAGING PC	12/15/2017	NF-3 Bill Form / HCFA 1500 Form	11/2/2017	72141	\$ 879.73
4197	0579093130101070	ECLIPSE MEDICAL IMAGING PC	12/18/2017	NF-3 Bill Form / HCFA 1500 Form	11/2/2017	73721	\$ 878.67
4198	0594944240101015	ECLIPSE MEDICAL IMAGING PC	12/18/2017	NF-3 Bill Form / HCFA 1500 Form	10/29/2017	72141	\$ 879.73
4199	0460544170101075	ECLIPSE MEDICAL IMAGING PC	12/19/2017	NF-3 Bill Form / HCFA 1500 Form	11/6/2017	72141	\$ 879.73
4200	0460544170101075	ECLIPSE MEDICAL IMAGING PC	12/19/2017	NF-3 Bill Form / HCFA 1500 Form	11/6/2017	72141	\$ 879.73

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Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
4201	0317794420101079	ECLIPSE MEDICAL IMAGING PC	12/19/2017	NF-3 Bill Form / HCFA 1500 Form	11/6/2017	72125	\$ 581.90
4202	0604111550101013	ECLIPSE MEDICAL IMAGING PC	12/19/2017	NF-3 Bill Form / HCFA 1500 Form	11/1/2017	73721	\$ 659.00
4203	0604111550101013	ECLIPSE MEDICAL IMAGING PC	12/19/2017	NF-3 Bill Form / HCFA 1500 Form	11/1/2017	73221	\$ 878.67
4204	0325088790101193	ECLIPSE MEDICAL IMAGING PC	12/20/2017	NF-3 Bill Form / HCFA 1500 Form	10/27/2017	72141	\$ 879.73
4205	0579093130101070	ECLIPSE MEDICAL IMAGING PC	12/22/2017	NF-3 Bill Form / HCFA 1500 Form	11/7/2017	73721	\$ 878.67
4206	0566858760101011	ECLIPSE MEDICAL IMAGING PC	12/22/2017	NF-3 Bill Form / HCFA 1500 Form	11/8/2017	73721	\$ 878.67
4207	0609434670101019	ECLIPSE MEDICAL IMAGING PC	12/22/2017	NF-3 Bill Form / HCFA 1500 Form	11/9/2017	73221	\$ 878.67
4208	0109592250101041	ECLIPSE MEDICAL IMAGING PC	12/22/2017	NF-3 Bill Form / HCFA 1500 Form	11/8/2017	72148	\$ 912.00
4209	0109592250101041	ECLIPSE MEDICAL IMAGING PC	12/22/2017	NF-3 Bill Form / HCFA 1500 Form	11/8/2017	72141	\$ 659.79
4210	0106092320101140	ECLIPSE MEDICAL IMAGING PC	12/22/2017	NF-3 Bill Form / HCFA 1500 Form	11/8/2017	72141	\$ 879.73
4211	0377175160101064	ECLIPSE MEDICAL IMAGING PC	12/22/2017	NF-3 Bill Form / HCFA 1500 Form	11/9/2017	72148	\$ 912.00
4212	0522678350101053	ECLIPSE MEDICAL IMAGING PC	12/22/2017	NF-3 Bill Form / HCFA 1500 Form	11/9/2017	73721	\$ 878.67
4213	0451261470101017	ECLIPSE MEDICAL IMAGING PC	12/22/2017	NF-3 Bill Form / HCFA 1500 Form	11/7/2017	73721	\$ 878.67
4214	0451261470101017	ECLIPSE MEDICAL IMAGING PC	12/22/2017	NF-3 Bill Form / HCFA 1500 Form	11/8/2017	73221	\$ 659.00
4215	0545411870101020	ECLIPSE MEDICAL IMAGING PC	12/22/2017	NF-3 Bill Form / HCFA 1500 Form	11/9/2017	72148	\$ 912.00
4216	0545411870101020	ECLIPSE MEDICAL IMAGING PC	12/22/2017	NF-3 Bill Form / HCFA 1500 Form	11/9/2017	73721	\$ 659.00
4217	0608474630101016	ECLIPSE MEDICAL IMAGING PC	12/22/2017	NF-3 Bill Form / HCFA 1500 Form	11/9/2017	72148	\$ 912.00
4218	0428034020101039	ECLIPSE MEDICAL IMAGING PC	12/26/2017	NF-3 Bill Form / HCFA 1500 Form	11/14/2017	72170	\$ 57.54
4219	0428034020101039	ECLIPSE MEDICAL IMAGING PC	12/26/2017	NF-3 Bill Form / HCFA 1500 Form	11/14/2017	72070	\$ 93.10
4220	0428034020101039	ECLIPSE MEDICAL IMAGING PC	12/26/2017	NF-3 Bill Form / HCFA 1500 Form	11/12/2017	72148	\$ 912.00
4221	0428034020101039	ECLIPSE MEDICAL IMAGING PC	12/26/2017	NF-3 Bill Form / HCFA 1500 Form	11/12/2017	72141	\$ 659.79
4222	0299414260101160	ECLIPSE MEDICAL IMAGING PC	12/26/2017	NF-3 Bill Form / HCFA 1500 Form	11/14/2017	72148	\$ 912.00
4223	0299414260101160	ECLIPSE MEDICAL IMAGING PC	12/26/2017	NF-3 Bill Form / HCFA 1500 Form	11/14/2017	72141	\$ 659.79
4224	0489797860101022	ECLIPSE MEDICAL IMAGING PC	12/26/2017	NF-3 Bill Form / HCFA 1500 Form	11/10/2017	73221	\$ 878.67
4225	0600654350101018	ECLIPSE MEDICAL IMAGING PC	12/26/2017	NF-3 Bill Form / HCFA 1500 Form	11/12/2017	73721	\$ 659.00
4226	0600654350101018	ECLIPSE MEDICAL IMAGING PC	12/26/2017	NF-3 Bill Form / HCFA 1500 Form	11/12/2017	73221	\$ 878.67
4227	0567540920101029	ECLIPSE MEDICAL IMAGING PC	12/26/2017	NF-3 Bill Form / HCFA 1500 Form	11/14/2017	73721	\$ 878.67
4228	0373938550101034	ECLIPSE MEDICAL IMAGING PC	12/26/2017	NF-3 Bill Form / HCFA 1500 Form	11/10/2017	72148	\$ 912.00
4229	0553792790101029	ECLIPSE MEDICAL IMAGING PC	12/26/2017	NF-3 Bill Form / HCFA 1500 Form	11/10/2017	72148	\$ 912.00
4230	0185755880101056	ECLIPSE MEDICAL IMAGING PC	12/26/2017	NF-3 Bill Form / HCFA 1500 Form	11/14/2017	73200	\$ 486.68
4231	0512335680101087	ECLIPSE MEDICAL IMAGING PC	12/26/2017	NF-3 Bill Form / HCFA 1500 Form	11/13/2017	72141	\$ 659.79
4232	0512335680101087	ECLIPSE MEDICAL IMAGING PC	12/26/2017	NF-3 Bill Form / HCFA 1500 Form	11/13/2017	72148	\$ 912.00
4233	0548254610101018	ECLIPSE MEDICAL IMAGING PC	12/26/2017	NF-3 Bill Form / HCFA 1500 Form	11/10/2017	73221	\$ 878.67
4234	0591691990101017	ECLIPSE MEDICAL IMAGING PC	12/26/2017	NF-3 Bill Form / HCFA 1500 Form	11/13/2017	73721	\$ 878.67
4235	0591691990101017	ECLIPSE MEDICAL IMAGING PC	12/26/2017	NF-3 Bill Form / HCFA 1500 Form	11/13/2017	73221	\$ 878.67
4236	0519497090101082	ECLIPSE MEDICAL IMAGING PC	12/26/2017	NF-3 Bill Form / HCFA 1500 Form	11/13/2017	72148	\$ 912.00
4237	0579093130101070	ECLIPSE MEDICAL IMAGING PC	12/26/2017	NF-3 Bill Form / HCFA 1500 Form	11/12/2017	72148	\$ 912.00
4238	0209348140101066	ECLIPSE MEDICAL IMAGING PC	12/26/2017	NF-3 Bill Form / HCFA 1500 Form	11/14/2017	72148	\$ 912.00
4239	0579093130101070	ECLIPSE MEDICAL IMAGING PC	12/26/2017	NF-3 Bill Form / HCFA 1500 Form	11/7/2017	72148	\$ 912.00
4240	0498056260101036	ECLIPSE MEDICAL IMAGING PC	12/26/2017	NF-3 Bill Form / HCFA 1500 Form	11/13/2017	73221	\$ 878.67
4241	0519497090101082	ECLIPSE MEDICAL IMAGING PC	12/26/2017	NF-3 Bill Form / HCFA 1500 Form	11/9/2017	72141	\$ 879.73
4242	0494623960101030	ECLIPSE MEDICAL IMAGING PC	12/26/2017	NF-3 Bill Form / HCFA 1500 Form	11/14/2017	72148	\$ 912.00
4243	0494623960101030	ECLIPSE MEDICAL IMAGING PC	12/26/2017	NF-3 Bill Form / HCFA 1500 Form	11/14/2017	73221	\$ 659.00
4244	0445170900101019	ECLIPSE MEDICAL IMAGING PC	12/26/2017	NF-3 Bill Form / HCFA 1500 Form	11/14/2017	72148	\$ 912.00
4245	0445170900101019	ECLIPSE MEDICAL IMAGING PC	12/26/2017	NF-3 Bill Form / HCFA 1500 Form	11/14/2017	72141	\$ 659.79
4246	0566858760101011	ECLIPSE MEDICAL IMAGING PC	12/26/2017	NF-3 Bill Form / HCFA 1500 Form	11/13/2017	72141	\$ 659.79
4247	0566858760101011	ECLIPSE MEDICAL IMAGING PC	12/26/2017	NF-3 Bill Form / HCFA 1500 Form	11/13/2017	72148	\$ 912.00
4248	0092083500101022	ECLIPSE MEDICAL IMAGING PC	12/27/2017	NF-3 Bill Form / HCFA 1500 Form	11/9/2017	73030	\$ 71.02
4249	0092083500101022	ECLIPSE MEDICAL IMAGING PC	12/27/2017	NF-3 Bill Form / HCFA 1500 Form	11/9/2017	72100	\$ 65.86
4250	0092083500101022	ECLIPSE MEDICAL IMAGING PC	12/27/2017	NF-3 Bill Form / HCFA 1500 Form	11/9/2017	73030	\$ 71.02
4251	0092083500101022	ECLIPSE MEDICAL IMAGING PC	12/27/2017	NF-3 Bill Form / HCFA 1500 Form	11/9/2017	72141	\$ 659.79
4252	0092083500101022	ECLIPSE MEDICAL IMAGING PC	12/27/2017	NF-3 Bill Form / HCFA 1500 Form	11/9/2017	72148	\$ 912.00
4253	0580653290101017	ECLIPSE MEDICAL IMAGING PC	12/27/2017	NF-3 Bill Form / HCFA 1500 Form	11/7/2017	72141	\$ 659.79
4254	0580653290101017	ECLIPSE MEDICAL IMAGING PC	12/27/2017	NF-3 Bill Form / HCFA 1500 Form	11/7/2017	72148	\$ 912.00
4255	0608053210101015	ECLIPSE MEDICAL IMAGING PC	12/28/2017	NF-3 Bill Form / HCFA 1500 Form	11/12/2017	72141	\$ 659.79
4256	0608053210101015	ECLIPSE MEDICAL IMAGING PC	12/28/2017	NF-3 Bill Form / HCFA 1500 Form	11/12/2017	72148	\$ 912.00
4257	0460544170101075	ECLIPSE MEDICAL IMAGING PC	1/2/2018	NF-3 Bill Form / HCFA 1500 Form	11/15/2017	72148	\$ 912.00
4258	0476969730101020	ECLIPSE MEDICAL IMAGING PC	1/2/2018	NF-3 Bill Form / HCFA 1500 Form	11/16/2017	72148	\$ 912.00
4259	0476969730101020	ECLIPSE MEDICAL IMAGING PC	1/2/2018	NF-3 Bill Form / HCFA 1500 Form	11/16/2017	72141	\$ 659.79
4260	0494623960101030	ECLIPSE MEDICAL IMAGING PC	1/2/2018	NF-3 Bill Form / HCFA 1500 Form	11/16/2017	73221	\$ 878.67
4261	0209348140101066	ECLIPSE MEDICAL IMAGING PC	1/2/2018	NF-3 Bill Form / HCFA 1500 Form	11/16/2017	72141	\$ 659.79
4262	0209348140101066	ECLIPSE MEDICAL IMAGING PC	1/2/2018	NF-3 Bill Form / HCFA 1500 Form	11/16/2017	72148	\$ 912.00
4263	0183068810101051	ECLIPSE MEDICAL IMAGING PC	1/2/2018	NF-3 Bill Form / HCFA 1500 Form	11/21/2017	72170	\$ 57.54
4264	0183068810101051	ECLIPSE MEDICAL IMAGING PC	1/2/2018	NF-3 Bill Form / HCFA 1500 Form	11/21/2017	72070	\$ 93.10
4265	0494623960101030	ECLIPSE MEDICAL IMAGING PC	1/2/2018	NF-3 Bill Form / HCFA 1500 Form	11/20/2017	72141	\$ 879.73
4266	0604111550101013	ECLIPSE MEDICAL IMAGING PC	1/2/2018	NF-3 Bill Form / HCFA 1500 Form	11/20/2017	72148	\$ 912.00
4267	0604111550101013	ECLIPSE MEDICAL IMAGING PC	1/2/2018	NF-3 Bill Form / HCFA 1500 Form	11/20/2017	72141	\$ 659.79
4268	0451261470101017	ECLIPSE MEDICAL IMAGING PC	1/2/2018	NF-3 Bill Form / HCFA 1500 Form	11/17/2017	73218	\$ 574.49
4269	0451261470101017	ECLIPSE MEDICAL IMAGING PC	1/2/2018	NF-3 Bill Form / HCFA 1500 Form	11/17/2017	72170	\$ 57.54
4270	0451261470101017	ECLIPSE MEDICAL IMAGING PC	1/2/2018	NF-3 Bill Form / HCFA 1500 Form	11/17/2017	73030	\$ 71.02

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Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
4271	0451261470101017	ECLIPSE MEDICAL IMAGING PC	1/2/2018	NF-3 Bill Form / HCFA 1500 Form	11/17/2017	72070	\$ 69.82
4272	0451261470101017	ECLIPSE MEDICAL IMAGING PC	1/2/2018	NF-3 Bill Form / HCFA 1500 Form	11/17/2017	73718	\$ 901.42
4273	0460544170101075	ECLIPSE MEDICAL IMAGING PC	1/2/2018	NF-3 Bill Form / HCFA 1500 Form	11/15/2017	72148	\$ 912.00
4274	0330092050101060	ECLIPSE MEDICAL IMAGING PC	1/2/2018	NF-3 Bill Form / HCFA 1500 Form	11/21/2017	70551	\$ 655.83
4275	0330092050101060	ECLIPSE MEDICAL IMAGING PC	1/2/2018	NF-3 Bill Form / HCFA 1500 Form	11/21/2017	73221	\$ 878.67
4276	0604111550101013	ECLIPSE MEDICAL IMAGING PC	1/2/2018	NF-3 Bill Form / HCFA 1500 Form	11/17/2017	72148	\$ 912.00
4277	0604111550101013	ECLIPSE MEDICAL IMAGING PC	1/2/2018	NF-3 Bill Form / HCFA 1500 Form	11/17/2017	72141	\$ 659.79
4278	0579093130101070	ECLIPSE MEDICAL IMAGING PC	1/2/2018	NF-3 Bill Form / HCFA 1500 Form	11/17/2017	72125	\$ 581.90
4279	0579093130101070	ECLIPSE MEDICAL IMAGING PC	1/2/2018	NF-3 Bill Form / HCFA 1500 Form	11/17/2017	73721	\$ 878.67
4280	0296811650101069	ECLIPSE MEDICAL IMAGING PC	1/2/2018	NF-3 Bill Form / HCFA 1500 Form	11/17/2017	72148	\$ 912.00
4281	0296811650101069	ECLIPSE MEDICAL IMAGING PC	1/2/2018	NF-3 Bill Form / HCFA 1500 Form	11/17/2017	72141	\$ 659.79
4282	0600654350101018	ECLIPSE MEDICAL IMAGING PC	1/2/2018	NF-3 Bill Form / HCFA 1500 Form	11/19/2017	73721	\$ 878.67
4283	0449305470101017	ECLIPSE MEDICAL IMAGING PC	1/2/2018	NF-3 Bill Form / HCFA 1500 Form	11/17/2017	73221	\$ 878.67
4284	0584649460101015	ECLIPSE MEDICAL IMAGING PC	1/3/2018	NF-3 Bill Form / HCFA 1500 Form	11/20/2017	73221	\$ 878.67
4285	0584649460101015	ECLIPSE MEDICAL IMAGING PC	1/3/2018	NF-3 Bill Form / HCFA 1500 Form	11/20/2017	73221	\$ 659.00
4286	0604111550101013	ECLIPSE MEDICAL IMAGING PC	1/8/2018	NF-3 Bill Form / HCFA 1500 Form	11/22/2017	72146	\$ 959.61
4287	0042217240101279	ECLIPSE MEDICAL IMAGING PC	1/8/2018	NF-3 Bill Form / HCFA 1500 Form	11/27/2017	73221	\$ 878.67
4288	0042217240101279	ECLIPSE MEDICAL IMAGING PC	1/8/2018	NF-3 Bill Form / HCFA 1500 Form	11/27/2017	72100	\$ 65.86
4289	0556165550101025	ECLIPSE MEDICAL IMAGING PC	1/8/2018	NF-3 Bill Form / HCFA 1500 Form	11/27/2017	73221	\$ 878.67
4290	0489797860101022	ECLIPSE MEDICAL IMAGING PC	1/8/2018	NF-3 Bill Form / HCFA 1500 Form	11/28/2017	72141	\$ 659.79
4291	0489797860101022	ECLIPSE MEDICAL IMAGING PC	1/8/2018	NF-3 Bill Form / HCFA 1500 Form	11/28/2017	72148	\$ 912.00
4292	0516274990101014	ECLIPSE MEDICAL IMAGING PC	1/8/2018	NF-3 Bill Form / HCFA 1500 Form	11/27/2017	73718	\$ 901.42
4293	0330092050101060	ECLIPSE MEDICAL IMAGING PC	1/9/2018	NF-3 Bill Form / HCFA 1500 Form	11/28/2017	73218	\$ 574.49
4294	0330092050101060	ECLIPSE MEDICAL IMAGING PC	1/9/2018	NF-3 Bill Form / HCFA 1500 Form	11/28/2017	73221	\$ 878.67
4295	0522678350101053	ECLIPSE MEDICAL IMAGING PC	1/9/2018	NF-3 Bill Form / HCFA 1500 Form	11/28/2017	73221	\$ 878.67
4296	0549869330101011	ECLIPSE MEDICAL IMAGING PC	1/9/2018	NF-3 Bill Form / HCFA 1500 Form	11/27/2017	73721	\$ 878.67
4297	0488319220101096	ECLIPSE MEDICAL IMAGING PC	1/9/2018	NF-3 Bill Form / HCFA 1500 Form	11/22/2017	73221	\$ 878.67
4298	0556165550101025	ECLIPSE MEDICAL IMAGING PC	1/9/2018	NF-3 Bill Form / HCFA 1500 Form	11/28/2017	72100	\$ 65.86
4299	0556165550101025	ECLIPSE MEDICAL IMAGING PC	1/9/2018	NF-3 Bill Form / HCFA 1500 Form	11/28/2017	73221	\$ 878.67
4300	0556165550101025	ECLIPSE MEDICAL IMAGING PC	1/9/2018	NF-3 Bill Form / HCFA 1500 Form	11/28/2017	72040	\$ 72.20
4301	0600654350101018	ECLIPSE MEDICAL IMAGING PC	1/9/2018	NF-3 Bill Form / HCFA 1500 Form	11/26/2017	72141	\$ 659.79
4302	0600654350101018	ECLIPSE MEDICAL IMAGING PC	1/9/2018	NF-3 Bill Form / HCFA 1500 Form	11/26/2017	72148	\$ 912.00
4303	0449305470101017	ECLIPSE MEDICAL IMAGING PC	1/15/2018	NF-3 Bill Form / HCFA 1500 Form	11/29/2017	73721	\$ 878.67
4304	0414169020101047	ECLIPSE MEDICAL IMAGING PC	1/15/2018	NF-3 Bill Form / HCFA 1500 Form	11/29/2017	72141	\$ 879.73
4305	0591691990101017	ECLIPSE MEDICAL IMAGING PC	1/15/2018	NF-3 Bill Form / HCFA 1500 Form	11/29/2017	72148	\$ 912.00
4306	0591691990101017	ECLIPSE MEDICAL IMAGING PC	1/15/2018	NF-3 Bill Form / HCFA 1500 Form	11/29/2017	72141	\$ 879.73
4307	0551622550101012	ECLIPSE MEDICAL IMAGING PC	1/15/2018	NF-3 Bill Form / HCFA 1500 Form	11/29/2017	70450	\$ 455.47
4308	0609434670101019	ECLIPSE MEDICAL IMAGING PC	1/15/2018	NF-3 Bill Form / HCFA 1500 Form	11/29/2017	72170	\$ 57.54
4309	0609434670101019	ECLIPSE MEDICAL IMAGING PC	1/15/2018	NF-3 Bill Form / HCFA 1500 Form	11/29/2017	72070	\$ 69.82
4310	0609434670101019	ECLIPSE MEDICAL IMAGING PC	1/15/2018	NF-3 Bill Form / HCFA 1500 Form	11/29/2017	73721	\$ 878.67
4311	0609434670101019	ECLIPSE MEDICAL IMAGING PC	1/15/2018	NF-3 Bill Form / HCFA 1500 Form	11/29/2017	73030	\$ 71.02
4312	0451261470101017	ECLIPSE MEDICAL IMAGING PC	1/15/2018	NF-3 Bill Form / HCFA 1500 Form	11/29/2017	72148	\$ 912.00
4313	0451261470101017	ECLIPSE MEDICAL IMAGING PC	1/15/2018	NF-3 Bill Form / HCFA 1500 Form	11/29/2017	72141	\$ 659.79
4314	0215488510101213	ECLIPSE MEDICAL IMAGING PC	1/15/2018	NF-3 Bill Form / HCFA 1500 Form	12/1/2017	73718	\$ 901.42
4315	0455471150101064	ECLIPSE MEDICAL IMAGING PC	1/15/2018	NF-3 Bill Form / HCFA 1500 Form	11/30/2017	73718	\$ 901.42
4316	0598863660101022	ECLIPSE MEDICAL IMAGING PC	1/15/2018	NF-3 Bill Form / HCFA 1500 Form	12/5/2017	72170	\$ 57.54
4317	0598863660101022	ECLIPSE MEDICAL IMAGING PC	1/15/2018	NF-3 Bill Form / HCFA 1500 Form	12/5/2017	73221	\$ 878.67
4318	0598863660101022	ECLIPSE MEDICAL IMAGING PC	1/15/2018	NF-3 Bill Form / HCFA 1500 Form	12/5/2017	72070	\$ 69.82
4319	0598863660101022	ECLIPSE MEDICAL IMAGING PC	1/15/2018	NF-3 Bill Form / HCFA 1500 Form	12/5/2017	73721	\$ 659.00
4320	0209348140101066	ECLIPSE MEDICAL IMAGING PC	1/15/2018	NF-3 Bill Form / HCFA 1500 Form	11/30/2017	72170	\$ 57.54
4321	0209348140101066	ECLIPSE MEDICAL IMAGING PC	1/15/2018	NF-3 Bill Form / HCFA 1500 Form	11/30/2017	72141	\$ 879.73
4322	0209348140101066	ECLIPSE MEDICAL IMAGING PC	1/15/2018	NF-3 Bill Form / HCFA 1500 Form	11/30/2017	72070	\$ 69.82
4323	0609984090101015	ECLIPSE MEDICAL IMAGING PC	1/15/2018	NF-3 Bill Form / HCFA 1500 Form	11/30/2017	73721	\$ 878.67
4324	0534569850101030	ECLIPSE MEDICAL IMAGING PC	1/15/2018	NF-3 Bill Form / HCFA 1500 Form	12/1/2017	73221	\$ 878.67
4325	0183068810101051	ECLIPSE MEDICAL IMAGING PC	1/15/2018	NF-3 Bill Form / HCFA 1500 Form	12/1/2017	72070	\$ 93.10
4326	0183068810101051	ECLIPSE MEDICAL IMAGING PC	1/15/2018	NF-3 Bill Form / HCFA 1500 Form	12/1/2017	72170	\$ 57.54
4327	0106395800101039	ECLIPSE MEDICAL IMAGING PC	1/15/2018	NF-3 Bill Form / HCFA 1500 Form	11/30/2017	73221	\$ 878.67
4328	0476969730101020	ECLIPSE MEDICAL IMAGING PC	1/15/2018	NF-3 Bill Form / HCFA 1500 Form	11/30/2017	72070	\$ 93.10
4329	0476969730101020	ECLIPSE MEDICAL IMAGING PC	1/15/2018	NF-3 Bill Form / HCFA 1500 Form	11/30/2017	72170	\$ 57.54
4330	0608053210101015	ECLIPSE MEDICAL IMAGING PC	1/16/2018	NF-3 Bill Form / HCFA 1500 Form	12/1/2017	72070	\$ 93.10
4331	0608053210101015	ECLIPSE MEDICAL IMAGING PC	1/16/2018	NF-3 Bill Form / HCFA 1500 Form	12/1/2017	72170	\$ 57.54
4332	0336214440101030	ECLIPSE MEDICAL IMAGING PC	1/16/2018	NF-3 Bill Form / HCFA 1500 Form	12/1/2017	72148	\$ 912.00
4333	0336214440101030	ECLIPSE MEDICAL IMAGING PC	1/16/2018	NF-3 Bill Form / HCFA 1500 Form	12/1/2017	73221	\$ 659.00
4334	0556165550101025	ECLIPSE MEDICAL IMAGING PC	1/16/2018	NF-3 Bill Form / HCFA 1500 Form	12/1/2017	73721	\$ 878.67
4335	0566282150101012	ECLIPSE MEDICAL IMAGING PC	1/16/2018	NF-3 Bill Form / HCFA 1500 Form	12/3/2017	72148	\$ 912.00
4336	0566282150101012	ECLIPSE MEDICAL IMAGING PC	1/16/2018	NF-3 Bill Form / HCFA 1500 Form	12/3/2017	72141	\$ 659.79
4337	0185755880101056	ECLIPSE MEDICAL IMAGING PC	1/22/2018	NF-3 Bill Form / HCFA 1500 Form	12/7/2017	72125	\$ 436.42
4338	0185755880101056	ECLIPSE MEDICAL IMAGING PC	1/22/2018	NF-3 Bill Form / HCFA 1500 Form	12/7/2017	72131	\$ 581.90
4339	0488319220101096	ECLIPSE MEDICAL IMAGING PC	1/22/2018	NF-3 Bill Form / HCFA 1500 Form	12/10/2017	72141	\$ 879.73
4340	0367959490101015	ECLIPSE MEDICAL IMAGING PC	1/22/2018	NF-3 Bill Form / HCFA 1500 Form	12/8/2017	72148	\$ 912.00

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Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
4341	0367959490101015	ECLIPSE MEDICAL IMAGING PC	1/22/2018	NF-3 Bill Form / HCFA 1500 Form	12/8/2017	72141	\$ 659.79
4342	0320924190101083	ECLIPSE MEDICAL IMAGING PC	1/22/2018	NF-3 Bill Form / HCFA 1500 Form	12/8/2017	72141	\$ 659.79
4343	0320924190101083	ECLIPSE MEDICAL IMAGING PC	1/22/2018	NF-3 Bill Form / HCFA 1500 Form	12/8/2017	72148	\$ 912.00
4344	0320924190101083	ECLIPSE MEDICAL IMAGING PC	1/22/2018	NF-3 Bill Form / HCFA 1500 Form	12/10/2017	72148	\$ 912.00
4345	0320924190101083	ECLIPSE MEDICAL IMAGING PC	1/22/2018	NF-3 Bill Form / HCFA 1500 Form	12/10/2017	72141	\$ 659.79
4346	0556165550101025	ECLIPSE MEDICAL IMAGING PC	1/22/2018	NF-3 Bill Form / HCFA 1500 Form	12/10/2017	72141	\$ 659.79
4347	0556165550101025	ECLIPSE MEDICAL IMAGING PC	1/22/2018	NF-3 Bill Form / HCFA 1500 Form	12/10/2017	72146	\$ 912.00
4348	0215488510101213	ECLIPSE MEDICAL IMAGING PC	1/22/2018	NF-3 Bill Form / HCFA 1500 Form	12/6/2017	72100	\$ 65.86
4349	0215488510101213	ECLIPSE MEDICAL IMAGING PC	1/22/2018	NF-3 Bill Form / HCFA 1500 Form	12/6/2017	72148	\$ 912.00
4350	0215488510101213	ECLIPSE MEDICAL IMAGING PC	1/22/2018	NF-3 Bill Form / HCFA 1500 Form	12/6/2017	73510	\$ 62.68
4351	0215488510101213	ECLIPSE MEDICAL IMAGING PC	1/22/2018	NF-3 Bill Form / HCFA 1500 Form	12/6/2017	72170	\$ 57.54
4352	0215488510101213	ECLIPSE MEDICAL IMAGING PC	1/22/2018	NF-3 Bill Form / HCFA 1500 Form	12/6/2017	72040	\$ 72.20
4353	0215488510101213	ECLIPSE MEDICAL IMAGING PC	1/22/2018	NF-3 Bill Form / HCFA 1500 Form	12/6/2017	72141	\$ 659.79
4354	0215488510101213	ECLIPSE MEDICAL IMAGING PC	1/22/2018	NF-3 Bill Form / HCFA 1500 Form	12/6/2017	72070	\$ 69.82
4355	0551622550101012	ECLIPSE MEDICAL IMAGING PC	1/22/2018	NF-3 Bill Form / HCFA 1500 Form	12/8/2017	72148	\$ 912.00
4356	0580899530101016	ECLIPSE MEDICAL IMAGING PC	1/22/2018	NF-3 Bill Form / HCFA 1500 Form	12/8/2017	73721	\$ 878.67
4357	0106395800101039	ECLIPSE MEDICAL IMAGING PC	1/22/2018	NF-3 Bill Form / HCFA 1500 Form	12/11/2017	72148	\$ 912.00
4358	0106395800101039	ECLIPSE MEDICAL IMAGING PC	1/22/2018	NF-3 Bill Form / HCFA 1500 Form	12/7/2017	73221	\$ 659.00
4359	0106395800101039	ECLIPSE MEDICAL IMAGING PC	1/22/2018	NF-3 Bill Form / HCFA 1500 Form	12/7/2017	72141	\$ 879.73
4360	0449305470101017	ECLIPSE MEDICAL IMAGING PC	1/22/2018	NF-3 Bill Form / HCFA 1500 Form	12/10/2017	72148	\$ 912.00
4361	0594944240101015	ECLIPSE MEDICAL IMAGING PC	1/22/2018	NF-3 Bill Form / HCFA 1500 Form	12/8/2017	72148	\$ 912.00
4362	0042217240101279	ECLIPSE MEDICAL IMAGING PC	1/22/2018	NF-3 Bill Form / HCFA 1500 Form	12/11/2017	72141	\$ 879.73
4363	0453021840101057	ECLIPSE MEDICAL IMAGING PC	1/25/2018	NF-3 Bill Form / HCFA 1500 Form	12/12/2017	73221	\$ 878.67
4364	0455471150101064	ECLIPSE MEDICAL IMAGING PC	1/25/2018	NF-3 Bill Form / HCFA 1500 Form	12/12/2017	73721	\$ 878.67
4365	0555665630101029	ECLIPSE MEDICAL IMAGING PC	1/26/2018	NF-3 Bill Form / HCFA 1500 Form	12/13/2017	72141	\$ 659.79
4366	0555665630101029	ECLIPSE MEDICAL IMAGING PC	1/26/2018	NF-3 Bill Form / HCFA 1500 Form	12/13/2017	72040	\$ 72.20
4367	0555665630101029	ECLIPSE MEDICAL IMAGING PC	1/26/2018	NF-3 Bill Form / HCFA 1500 Form	12/13/2017	72100	\$ 65.86
4368	0555665630101029	ECLIPSE MEDICAL IMAGING PC	1/26/2018	NF-3 Bill Form / HCFA 1500 Form	12/13/2017	72148	\$ 912.00
4369	0575849230101037	ECLIPSE MEDICAL IMAGING PC	1/25/2018	NF-3 Bill Form / HCFA 1500 Form	12/12/2017	72170	\$ 57.54
4370	0575849230101037	ECLIPSE MEDICAL IMAGING PC	1/25/2018	NF-3 Bill Form / HCFA 1500 Form	12/12/2017	72070	\$ 69.82
4371	0575849230101037	ECLIPSE MEDICAL IMAGING PC	1/25/2018	NF-3 Bill Form / HCFA 1500 Form	12/12/2017	73030	\$ 94.69
4372	0556165550101025	ECLIPSE MEDICAL IMAGING PC	1/26/2018	NF-3 Bill Form / HCFA 1500 Form	12/13/2017	72148	\$ 912.00
4373	0556165550101025	ECLIPSE MEDICAL IMAGING PC	1/26/2018	NF-3 Bill Form / HCFA 1500 Form	12/13/2017	72141	\$ 659.79
4374	0284256310101048	ECLIPSE MEDICAL IMAGING PC	1/26/2018	NF-3 Bill Form / HCFA 1500 Form	12/13/2017	73221	\$ 878.67
4375	0367959490101015	ECLIPSE MEDICAL IMAGING PC	1/26/2018	NF-3 Bill Form / HCFA 1500 Form	12/13/2017	72040	\$ 96.27
4376	0284256310101048	ECLIPSE MEDICAL IMAGING PC	1/26/2018	NF-3 Bill Form / HCFA 1500 Form	12/13/2017	72148	\$ 912.00
4377	0609984290101015	ECLIPSE MEDICAL IMAGING PC	1/26/2018	NF-3 Bill Form / HCFA 1500 Form	12/13/2017	72148	\$ 912.00
4378	0487352910101010	ECLIPSE MEDICAL IMAGING PC	1/29/2018	NF-3 Bill Form / HCFA 1500 Form	12/14/2017	72170	\$ 57.54
4379	0487352910101010	ECLIPSE MEDICAL IMAGING PC	1/29/2018	NF-3 Bill Form / HCFA 1500 Form	12/14/2017	73218	\$ 765.99
4380	0487352910101010	ECLIPSE MEDICAL IMAGING PC	1/29/2018	NF-3 Bill Form / HCFA 1500 Form	12/14/2017	72070	\$ 69.82
4381	0518856370101032	ECLIPSE MEDICAL IMAGING PC	1/29/2018	NF-3 Bill Form / HCFA 1500 Form	12/14/2017	73030	\$ 94.69
4382	0518856370101032	ECLIPSE MEDICAL IMAGING PC	1/29/2018	NF-3 Bill Form / HCFA 1500 Form	12/14/2017	72170	\$ 57.54
4383	0518856370101032	ECLIPSE MEDICAL IMAGING PC	1/29/2018	NF-3 Bill Form / HCFA 1500 Form	12/14/2017	72070	\$ 69.82
4384	0521169530101032	ECLIPSE MEDICAL IMAGING PC	1/29/2018	NF-3 Bill Form / HCFA 1500 Form	12/17/2017	72148	\$ 912.00
4385	0597892980101017	ECLIPSE MEDICAL IMAGING PC	1/29/2018	NF-3 Bill Form / HCFA 1500 Form	12/15/2017	73221	\$ 878.67
4386	0597892980101017	ECLIPSE MEDICAL IMAGING PC	1/29/2018	NF-3 Bill Form / HCFA 1500 Form	12/15/2017	73721	\$ 659.00
4387	0292873380101078	ECLIPSE MEDICAL IMAGING PC	1/29/2018	NF-3 Bill Form / HCFA 1500 Form	12/17/2017	72141	\$ 659.79
4388	0292873380101078	ECLIPSE MEDICAL IMAGING PC	1/29/2018	NF-3 Bill Form / HCFA 1500 Form	12/17/2017	72148	\$ 912.00
4389	0521169530101032	ECLIPSE MEDICAL IMAGING PC	1/29/2018	NF-3 Bill Form / HCFA 1500 Form	12/17/2017	72141	\$ 879.73
4390	0455471150101064	ECLIPSE MEDICAL IMAGING PC	2/2/2018	NF-3 Bill Form / HCFA 1500 Form	12/19/2017	72141	\$ 659.79
4391	0455471150101064	ECLIPSE MEDICAL IMAGING PC	2/2/2018	NF-3 Bill Form / HCFA 1500 Form	12/19/2017	72148	\$ 912.00
4392	0599245320101023	ECLIPSE MEDICAL IMAGING PC	2/2/2018	NF-3 Bill Form / HCFA 1500 Form	12/18/2017	73218	\$ 574.49
4393	0599245320101023	ECLIPSE MEDICAL IMAGING PC	2/2/2018	NF-3 Bill Form / HCFA 1500 Form	12/18/2017	72141	\$ 879.73
4394	0383226190101111	ECLIPSE MEDICAL IMAGING PC	2/5/2018	NF-3 Bill Form / HCFA 1500 Form	12/19/2017	73221	\$ 878.67
4395	0473335120107030	ECLIPSE MEDICAL IMAGING PC	2/5/2018	NF-3 Bill Form / HCFA 1500 Form	12/20/2017	73718	\$ 901.42
4396	0473335120107030	ECLIPSE MEDICAL IMAGING PC	2/5/2018	NF-3 Bill Form / HCFA 1500 Form	12/20/2017	73221	\$ 659.00
4397	0592523190101019	ECLIPSE MEDICAL IMAGING PC	2/5/2018	NF-3 Bill Form / HCFA 1500 Form	12/20/2017	73221	\$ 878.67
4398	0592523190101019	ECLIPSE MEDICAL IMAGING PC	2/5/2018	NF-3 Bill Form / HCFA 1500 Form	12/20/2017	73221	\$ 659.00
4399	0551622550101012	ECLIPSE MEDICAL IMAGING PC	2/5/2018	NF-3 Bill Form / HCFA 1500 Form	12/21/2017	72125	\$ 581.90
4400	0371447200101065	ECLIPSE MEDICAL IMAGING PC	2/5/2018	NF-3 Bill Form / HCFA 1500 Form	12/20/2017	73221	\$ 878.67
4401	0603159570101019	ECLIPSE MEDICAL IMAGING PC	2/5/2018	NF-3 Bill Form / HCFA 1500 Form	12/24/2017	72148	\$ 912.00
4402	0603159570101019	ECLIPSE MEDICAL IMAGING PC	2/5/2018	NF-3 Bill Form / HCFA 1500 Form	12/24/2017	72141	\$ 659.79
4403	0540507560101017	ECLIPSE MEDICAL IMAGING PC	2/5/2018	NF-3 Bill Form / HCFA 1500 Form	12/22/2017	72148	\$ 912.00
4404	0540507560101017	ECLIPSE MEDICAL IMAGING PC	2/5/2018	NF-3 Bill Form / HCFA 1500 Form	12/22/2017	72141	\$ 659.79
4405	0460544170101075	ECLIPSE MEDICAL IMAGING PC	2/5/2018	NF-3 Bill Form / HCFA 1500 Form	12/21/2017	73721	\$ 878.67
4406	0383226190101111	ECLIPSE MEDICAL IMAGING PC	2/5/2018	NF-3 Bill Form / HCFA 1500 Form	12/21/2017	73221	\$ 878.67
4407	0344546940101048	ECLIPSE MEDICAL IMAGING PC	2/5/2018	NF-3 Bill Form / HCFA 1500 Form	12/21/2017	72148	\$ 912.00
4408	0458968500101055	ECLIPSE MEDICAL IMAGING PC	2/6/2018	NF-3 Bill Form / HCFA 1500 Form	12/22/2017	72170	\$ 57.54
4409	0458968500101055	ECLIPSE MEDICAL IMAGING PC	2/6/2018	NF-3 Bill Form / HCFA 1500 Form	12/22/2017	72070	\$ 69.82
4410	0458968500101055	ECLIPSE MEDICAL IMAGING PC	2/6/2018	NF-3 Bill Form / HCFA 1500 Form	12/22/2017	73030	\$ 94.69

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Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
4411	0295165580101090	ECLIPSE MEDICAL IMAGING PC	2/8/2018	NF-3 Bill Form / HCFA 1500 Form	12/26/2017	73221	\$ 878.67
4412	0535076120101039	ECLIPSE MEDICAL IMAGING PC	2/8/2018	NF-3 Bill Form / HCFA 1500 Form	12/26/2017	72070	\$ 93.10
4413	0535076120101039	ECLIPSE MEDICAL IMAGING PC	2/8/2018	NF-3 Bill Form / HCFA 1500 Form	12/26/2017	72170	\$ 57.54
4414	0453021840101057	ECLIPSE MEDICAL IMAGING PC	2/9/2018	NF-3 Bill Form / HCFA 1500 Form	12/19/2017	72148	\$ 912.00
4415	0453021840101057	ECLIPSE MEDICAL IMAGING PC	2/9/2018	NF-3 Bill Form / HCFA 1500 Form	12/19/2017	72141	\$ 659.79
4416	0473335120107030	ECLIPSE MEDICAL IMAGING PC	2/9/2018	NF-3 Bill Form / HCFA 1500 Form	12/26/2017	72141	\$ 879.73
4417	0473335120107030	ECLIPSE MEDICAL IMAGING PC	2/9/2018	NF-3 Bill Form / HCFA 1500 Form	12/26/2017	73721	\$ 659.00
4418	0597892980101017	ECLIPSE MEDICAL IMAGING PC	2/12/2018	NF-3 Bill Form / HCFA 1500 Form	12/31/2017	72141	\$ 659.79
4419	0597892980101017	ECLIPSE MEDICAL IMAGING PC	2/12/2018	NF-3 Bill Form / HCFA 1500 Form	12/31/2017	72148	\$ 912.00
4420	0291866430101032	ECLIPSE MEDICAL IMAGING PC	2/13/2018	NF-3 Bill Form / HCFA 1500 Form	12/28/2017	73030	\$ 94.69
4421	0291866430101032	ECLIPSE MEDICAL IMAGING PC	2/13/2018	NF-3 Bill Form / HCFA 1500 Form	12/28/2017	72170	\$ 57.54
4422	0291866430101032	ECLIPSE MEDICAL IMAGING PC	2/13/2018	NF-3 Bill Form / HCFA 1500 Form	12/28/2017	72070	\$ 69.82
4423	0598863660101022	ECLIPSE MEDICAL IMAGING PC	2/13/2018	NF-3 Bill Form / HCFA 1500 Form	12/28/2017	72148	\$ 912.00
4424	0598863660101022	ECLIPSE MEDICAL IMAGING PC	2/13/2018	NF-3 Bill Form / HCFA 1500 Form	12/28/2017	73221	\$ 659.00
4425	0592523190101019	ECLIPSE MEDICAL IMAGING PC	2/13/2018	NF-3 Bill Form / HCFA 1500 Form	12/29/2017	72070	\$ 69.82
4426	0592523190101019	ECLIPSE MEDICAL IMAGING PC	2/13/2018	NF-3 Bill Form / HCFA 1500 Form	12/29/2017	72141	\$ 659.79
4427	0592523190101019	ECLIPSE MEDICAL IMAGING PC	2/13/2018	NF-3 Bill Form / HCFA 1500 Form	12/29/2017	72148	\$ 912.00
4428	0592523190101019	ECLIPSE MEDICAL IMAGING PC	2/13/2018	NF-3 Bill Form / HCFA 1500 Form	12/29/2017	73030	\$ 71.02
4429	0592523190101019	ECLIPSE MEDICAL IMAGING PC	2/13/2018	NF-3 Bill Form / HCFA 1500 Form	12/29/2017	72170	\$ 57.54
4430	0592523190101019	ECLIPSE MEDICAL IMAGING PC	2/13/2018	NF-3 Bill Form / HCFA 1500 Form	12/29/2017	73510	\$ 62.68
4431	0042217240101279	ECLIPSE MEDICAL IMAGING PC	2/13/2018	NF-3 Bill Form / HCFA 1500 Form	12/28/2017	72148	\$ 912.00
4432	0042217240101279	ECLIPSE MEDICAL IMAGING PC	2/13/2018	NF-3 Bill Form / HCFA 1500 Form	12/28/2017	73721	\$ 659.00
4433	0395390760101103	ECLIPSE MEDICAL IMAGING PC	2/15/2018	NF-3 Bill Form / HCFA 1500 Form	1/2/2018	73721	\$ 878.67
4434	0395390760101103	ECLIPSE MEDICAL IMAGING PC	2/16/2018	NF-3 Bill Form / HCFA 1500 Form	1/2/2018	73221	\$ 878.67
4435	0609019050101018	ECLIPSE MEDICAL IMAGING PC	2/16/2018	NF-3 Bill Form / HCFA 1500 Form	1/3/2018	73221	\$ 878.67
4436	0609019050101018	ECLIPSE MEDICAL IMAGING PC	2/16/2018	NF-3 Bill Form / HCFA 1500 Form	1/3/2018	73721	\$ 878.67
4437	0344546940101048	ECLIPSE MEDICAL IMAGING PC	2/16/2018	NF-3 Bill Form / HCFA 1500 Form	1/2/2018	73221	\$ 878.67
4438	0395390760101103	ECLIPSE MEDICAL IMAGING PC	2/19/2018	NF-3 Bill Form / HCFA 1500 Form	1/4/2018	73721	\$ 878.67
4439	0395390760101103	ECLIPSE MEDICAL IMAGING PC	2/19/2018	NF-3 Bill Form / HCFA 1500 Form	1/4/2018	73221	\$ 878.67
4440	0401265610101200	ECLIPSE MEDICAL IMAGING PC	2/20/2018	NF-3 Bill Form / HCFA 1500 Form	1/8/2018	73221	\$ 878.67
4441	0514398800101039	ECLIPSE MEDICAL IMAGING PC	2/20/2018	NF-3 Bill Form / HCFA 1500 Form	1/8/2018	72141	\$ 659.79
4442	0514398800101039	ECLIPSE MEDICAL IMAGING PC	2/20/2018	NF-3 Bill Form / HCFA 1500 Form	1/8/2018	72148	\$ 912.00
4443	0572304410101012	ECLIPSE MEDICAL IMAGING PC	2/20/2018	NF-3 Bill Form / HCFA 1500 Form	1/7/2018	73221	\$ 878.67
4444	0518856370101032	ECLIPSE MEDICAL IMAGING PC	2/20/2018	NF-3 Bill Form / HCFA 1500 Form	1/5/2018	72148	\$ 912.00
4445	0518856370101032	ECLIPSE MEDICAL IMAGING PC	2/20/2018	NF-3 Bill Form / HCFA 1500 Form	1/5/2018	73221	\$ 659.00
4446	0401265610101200	ECLIPSE MEDICAL IMAGING PC	2/20/2018	NF-3 Bill Form / HCFA 1500 Form	1/8/2018	73721	\$ 878.67
4447	0574994660101064	ECLIPSE MEDICAL IMAGING PC	2/20/2018	NF-3 Bill Form / HCFA 1500 Form	1/8/2018	72131	\$ 436.42
4448	0574994660101064	ECLIPSE MEDICAL IMAGING PC	2/20/2018	NF-3 Bill Form / HCFA 1500 Form	1/8/2018	72125	\$ 581.90
4449	0417911510101053	ECLIPSE MEDICAL IMAGING PC	2/20/2018	NF-3 Bill Form / HCFA 1500 Form	1/7/2018	73721	\$ 878.67
4450	0518856370101032	ECLIPSE MEDICAL IMAGING PC	2/26/2018	NF-3 Bill Form / HCFA 1500 Form	1/14/2018	73218	\$ 765.99
4451	0472141720101022	ECLIPSE MEDICAL IMAGING PC	2/26/2018	NF-3 Bill Form / HCFA 1500 Form	1/11/2018	73221	\$ 878.67
4452	0431172890101054	ECLIPSE MEDICAL IMAGING PC	2/26/2018	NF-3 Bill Form / HCFA 1500 Form	1/11/2018	72170	\$ 57.54
4453	0431172890101054	ECLIPSE MEDICAL IMAGING PC	2/26/2018	NF-3 Bill Form / HCFA 1500 Form	1/11/2018	72070	\$ 93.10
4454	0455285740101065	ECLIPSE MEDICAL IMAGING PC	2/26/2018	NF-3 Bill Form / HCFA 1500 Form	1/12/2018	73721	\$ 659.00
4455	0455285740101065	ECLIPSE MEDICAL IMAGING PC	2/26/2018	NF-3 Bill Form / HCFA 1500 Form	1/12/2018	73221	\$ 878.67
4456	0540507560101017	ECLIPSE MEDICAL IMAGING PC	2/26/2018	NF-3 Bill Form / HCFA 1500 Form	1/12/2018	72070	\$ 93.10
4457	0540507560101017	ECLIPSE MEDICAL IMAGING PC	2/26/2018	NF-3 Bill Form / HCFA 1500 Form	1/12/2018	72170	\$ 57.54
4458	0551622550101012	ECLIPSE MEDICAL IMAGING PC	2/27/2018	NF-3 Bill Form / HCFA 1500 Form	1/9/2018	73718	\$ 901.42
4459	0295165580101090	ECLIPSE MEDICAL IMAGING PC	2/27/2018	NF-3 Bill Form / HCFA 1500 Form	1/9/2018	72141	\$ 879.73
4460	0518856370101032	ECLIPSE MEDICAL IMAGING PC	2/27/2018	NF-3 Bill Form / HCFA 1500 Form	1/9/2018	72141	\$ 879.73
4461	0609019050101018	ECLIPSE MEDICAL IMAGING PC	3/1/2018	NF-3 Bill Form / HCFA 1500 Form	1/15/2018	72148	\$ 912.00
4462	0609019050101018	ECLIPSE MEDICAL IMAGING PC	3/1/2018	NF-3 Bill Form / HCFA 1500 Form	1/15/2018	73221	\$ 878.67
4463	0609019050101018	ECLIPSE MEDICAL IMAGING PC	3/1/2018	NF-3 Bill Form / HCFA 1500 Form	1/15/2018	73721	\$ 878.67
4464	0313199090101025	ECLIPSE MEDICAL IMAGING PC	3/1/2018	NF-3 Bill Form / HCFA 1500 Form	1/15/2018	73510	\$ 83.58
4465	0313199090101025	ECLIPSE MEDICAL IMAGING PC	3/1/2018	NF-3 Bill Form / HCFA 1500 Form	1/15/2018	72170	\$ 57.54
4466	0313199090101025	ECLIPSE MEDICAL IMAGING PC	3/1/2018	NF-3 Bill Form / HCFA 1500 Form	1/15/2018	73550	\$ 80.93
4467	0599245320101023	ECLIPSE MEDICAL IMAGING PC	3/1/2018	NF-3 Bill Form / HCFA 1500 Form	1/15/2018	72148	\$ 912.00
4468	0609019050101018	ECLIPSE MEDICAL IMAGING PC	3/1/2018	NF-3 Bill Form / HCFA 1500 Form	1/15/2018	73221	\$ 878.67
4469	0300254150101020	ECLIPSE MEDICAL IMAGING PC	3/2/2018	NF-3 Bill Form / HCFA 1500 Form	1/16/2018	73721	\$ 878.67
4470	0339074860101069	ECLIPSE MEDICAL IMAGING PC	3/2/2018	NF-3 Bill Form / HCFA 1500 Form	1/16/2018	73721	\$ 659.00
4471	0339074860101069	ECLIPSE MEDICAL IMAGING PC	3/2/2018	NF-3 Bill Form / HCFA 1500 Form	1/16/2018	73221	\$ 878.67
4472	0585374810101016	ECLIPSE MEDICAL IMAGING PC	3/2/2018	NF-3 Bill Form / HCFA 1500 Form	1/17/2018	72148	\$ 912.00
4473	0585374810101016	ECLIPSE MEDICAL IMAGING PC	3/2/2018	NF-3 Bill Form / HCFA 1500 Form	1/17/2018	73221	\$ 659.00
4474	0401265610101200	ECLIPSE MEDICAL IMAGING PC	3/5/2018	NF-3 Bill Form / HCFA 1500 Form	1/18/2018	72148	\$ 912.00
4475	0343554260101060	ECLIPSE MEDICAL IMAGING PC	3/5/2018	NF-3 Bill Form / HCFA 1500 Form	1/18/2018	72141	\$ 659.79
4476	0343554260101060	ECLIPSE MEDICAL IMAGING PC	3/5/2018	NF-3 Bill Form / HCFA 1500 Form	1/18/2018	72148	\$ 912.00
4477	0610798150101013	ECLIPSE MEDICAL IMAGING PC	3/5/2018	NF-3 Bill Form / HCFA 1500 Form	1/19/2018	73200	\$ 486.68
4478	0559832810101015	ECLIPSE MEDICAL IMAGING PC	3/5/2018	NF-3 Bill Form / HCFA 1500 Form	1/19/2018	73221	\$ 878.67
4479	0561649140101036	ECLIPSE MEDICAL IMAGING PC	3/5/2018	NF-3 Bill Form / HCFA 1500 Form	1/19/2018	73200	\$ 486.68
4480	0561649140101036	ECLIPSE MEDICAL IMAGING PC	3/5/2018	NF-3 Bill Form / HCFA 1500 Form	1/19/2018	73700	\$ 365.01

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Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
4481	0517644320101042	ECLIPSE MEDICAL IMAGING PC	3/5/2018	NF-3 Bill Form / HCFA 1500 Form	1/18/2018	72141	\$ 879.73
4482	0455285740101065	ECLIPSE MEDICAL IMAGING PC	3/8/2018	NF-3 Bill Form / HCFA 1500 Form	1/19/2018	72148	\$ 912.00
4483	0455285740101065	ECLIPSE MEDICAL IMAGING PC	3/8/2018	NF-3 Bill Form / HCFA 1500 Form	1/19/2018	72141	\$ 659.79
4484	0500248850101098	ECLIPSE MEDICAL IMAGING PC	3/8/2018	NF-3 Bill Form / HCFA 1500 Form	1/23/2018	72141	\$ 879.73
4485	0145120510101068	ECLIPSE MEDICAL IMAGING PC	3/8/2018	NF-3 Bill Form / HCFA 1500 Form	1/23/2018	72170	\$ 57.54
4486	0145120510101068	ECLIPSE MEDICAL IMAGING PC	3/8/2018	NF-3 Bill Form / HCFA 1500 Form	1/23/2018	72070	\$ 69.82
4487	0145120510101068	ECLIPSE MEDICAL IMAGING PC	3/8/2018	NF-3 Bill Form / HCFA 1500 Form	1/23/2018	73510	\$ 62.68
4488	0145120510101068	ECLIPSE MEDICAL IMAGING PC	3/8/2018	NF-3 Bill Form / HCFA 1500 Form	1/23/2018	73030	\$ 94.69
4489	0190080490101062	ECLIPSE MEDICAL IMAGING PC	3/8/2018	NF-3 Bill Form / HCFA 1500 Form	1/23/2018	73218	\$ 765.99
4490	0594944240101023	ECLIPSE MEDICAL IMAGING PC	2/27/2018	NF-3 Bill Form / HCFA 1500 Form	1/10/2018	73721	\$ 878.67
4491	0339074860101069	ECLIPSE MEDICAL IMAGING PC	3/12/2018	NF-3 Bill Form / HCFA 1500 Form	1/24/2018	73721	\$ 878.67
4492	0594944240101023	ECLIPSE MEDICAL IMAGING PC	3/12/2018	NF-3 Bill Form / HCFA 1500 Form	1/22/2018	72148	\$ 912.00
4493	0395390760101103	ECLIPSE MEDICAL IMAGING PC	3/12/2018	NF-3 Bill Form / HCFA 1500 Form	1/24/2018	72141	\$ 879.73
4494	0395390760101103	ECLIPSE MEDICAL IMAGING PC	3/12/2018	NF-3 Bill Form / HCFA 1500 Form	1/24/2018	72148	\$ 912.00
4495	0561714060101042	ECLIPSE MEDICAL IMAGING PC	3/12/2018	NF-3 Bill Form / HCFA 1500 Form	1/24/2018	73721	\$ 878.67
4496	0269043950101192	ECLIPSE MEDICAL IMAGING PC	3/12/2018	NF-3 Bill Form / HCFA 1500 Form	1/24/2018	73221	\$ 659.00
4497	0269043950101192	ECLIPSE MEDICAL IMAGING PC	3/12/2018	NF-3 Bill Form / HCFA 1500 Form	1/24/2018	72148	\$ 912.00
4498	0313199090101025	ECLIPSE MEDICAL IMAGING PC	3/12/2018	NF-3 Bill Form / HCFA 1500 Form	1/29/2018	72195	\$ 899.83
4499	0594944240101023	ECLIPSE MEDICAL IMAGING PC	3/12/2018	NF-3 Bill Form / HCFA 1500 Form	1/29/2018	72141	\$ 879.73
4500	0451331700101044	ECLIPSE MEDICAL IMAGING PC	3/12/2018	NF-3 Bill Form / HCFA 1500 Form	1/22/2018	73120	\$ 47.61
4501	0451331700101044	ECLIPSE MEDICAL IMAGING PC	3/12/2018	NF-3 Bill Form / HCFA 1500 Form	1/22/2018	73100	\$ 46.42
4502	0451331700101044	ECLIPSE MEDICAL IMAGING PC	3/12/2018	NF-3 Bill Form / HCFA 1500 Form	1/22/2018	73221	\$ 878.67
4503	0300254150101020	ECLIPSE MEDICAL IMAGING PC	3/12/2018	NF-3 Bill Form / HCFA 1500 Form	1/26/2018	72141	\$ 879.73
4504	0604171150101037	ECLIPSE MEDICAL IMAGING PC	3/12/2018	NF-3 Bill Form / HCFA 1500 Form	1/25/2018	73221	\$ 878.67
4505	0344546940101048	ECLIPSE MEDICAL IMAGING PC	3/12/2018	NF-3 Bill Form / HCFA 1500 Form	1/25/2018	73221	\$ 878.67
4506	0537189930101020	ECLIPSE MEDICAL IMAGING PC	3/12/2018	NF-3 Bill Form / HCFA 1500 Form	1/26/2018	72148	\$ 912.00
4507	0537189930101020	ECLIPSE MEDICAL IMAGING PC	3/12/2018	NF-3 Bill Form / HCFA 1500 Form	1/26/2018	73221	\$ 659.00
4508	0417030150101024	ECLIPSE MEDICAL IMAGING PC	3/12/2018	NF-3 Bill Form / HCFA 1500 Form	1/25/2018	73030	\$ 94.69
4509	0417030150101024	ECLIPSE MEDICAL IMAGING PC	3/12/2018	NF-3 Bill Form / HCFA 1500 Form	1/25/2018	72170	\$ 57.54
4510	0417030150101024	ECLIPSE MEDICAL IMAGING PC	3/12/2018	NF-3 Bill Form / HCFA 1500 Form	1/25/2018	72070	\$ 69.82
4511	0604985510101019	ECLIPSE MEDICAL IMAGING PC	3/12/2018	NF-3 Bill Form / HCFA 1500 Form	1/28/2018	73721	\$ 878.67
4512	0417911510101053	ECLIPSE MEDICAL IMAGING PC	3/12/2018	NF-3 Bill Form / HCFA 1500 Form	1/24/2018	73221	\$ 878.67
4513	0214301060101056	ECLIPSE MEDICAL IMAGING PC	3/12/2018	NF-3 Bill Form / HCFA 1500 Form	1/29/2018	73221	\$ 878.67
4514	0290163990101029	ECLIPSE MEDICAL IMAGING PC	3/12/2018	NF-3 Bill Form / HCFA 1500 Form	1/29/2018	72141	\$ 879.73
4515	0290163990101029	ECLIPSE MEDICAL IMAGING PC	3/12/2018	NF-3 Bill Form / HCFA 1500 Form	1/29/2018	73721	\$ 659.00
4516	0235137090101194	ECLIPSE MEDICAL IMAGING PC	3/12/2018	NF-3 Bill Form / HCFA 1500 Form	1/29/2018	73510	\$ 83.58
4517	0561649140101036	ECLIPSE MEDICAL IMAGING PC	3/12/2018	NF-3 Bill Form / HCFA 1500 Form	1/26/2018	72125	\$ 581.90
4518	0561649140101036	ECLIPSE MEDICAL IMAGING PC	3/12/2018	NF-3 Bill Form / HCFA 1500 Form	1/26/2018	73700	\$ 365.01
4519	0489345170101058	ECLIPSE MEDICAL IMAGING PC	3/15/2018	NF-3 Bill Form / HCFA 1500 Form	1/31/2018	72148	\$ 912.00
4520	0395390760101103	ECLIPSE MEDICAL IMAGING PC	3/15/2018	NF-3 Bill Form / HCFA 1500 Form	1/29/2018	72170	\$ 57.54
4521	0395390760101103	ECLIPSE MEDICAL IMAGING PC	3/15/2018	NF-3 Bill Form / HCFA 1500 Form	1/29/2018	72070	\$ 69.82
4522	0395390760101103	ECLIPSE MEDICAL IMAGING PC	3/15/2018	NF-3 Bill Form / HCFA 1500 Form	1/29/2018	72141	\$ 879.73
4523	0609381600101017	ECLIPSE MEDICAL IMAGING PC	3/15/2018	NF-3 Bill Form / HCFA 1500 Form	1/30/2018	72070	\$ 93.10
4524	0609381600101017	ECLIPSE MEDICAL IMAGING PC	3/15/2018	NF-3 Bill Form / HCFA 1500 Form	1/30/2018	72170	\$ 57.54
4525	0313199090101025	ECLIPSE MEDICAL IMAGING PC	3/15/2018	NF-3 Bill Form / HCFA 1500 Form	1/30/2018	73700	\$ 486.68
4526	0271760110101053	ECLIPSE MEDICAL IMAGING PC	3/16/2018	NF-3 Bill Form / HCFA 1500 Form	1/31/2018	73721	\$ 878.67
4527	0108538720101054	ECLIPSE MEDICAL IMAGING PC	3/19/2018	NF-3 Bill Form / HCFA 1500 Form	2/1/2018	73221	\$ 659.00
4528	0108538720101054	ECLIPSE MEDICAL IMAGING PC	3/19/2018	NF-3 Bill Form / HCFA 1500 Form	2/1/2018	73721	\$ 878.67
4529	0395390760101103	ECLIPSE MEDICAL IMAGING PC	3/19/2018	NF-3 Bill Form / HCFA 1500 Form	2/5/2018	72070	\$ 69.82
4530	0395390760101103	ECLIPSE MEDICAL IMAGING PC	3/19/2018	NF-3 Bill Form / HCFA 1500 Form	2/5/2018	72170	\$ 57.54
4531	0395390760101103	ECLIPSE MEDICAL IMAGING PC	3/19/2018	NF-3 Bill Form / HCFA 1500 Form	2/5/2018	72148	\$ 912.00
4532	0613601190101026	ECLIPSE MEDICAL IMAGING PC	3/19/2018	NF-3 Bill Form / HCFA 1500 Form	2/4/2018	72148	\$ 912.00
4533	0613601190101026	ECLIPSE MEDICAL IMAGING PC	3/19/2018	NF-3 Bill Form / HCFA 1500 Form	2/4/2018	73221	\$ 659.00
4534	0537189930101020	ECLIPSE MEDICAL IMAGING PC	3/19/2018	NF-3 Bill Form / HCFA 1500 Form	2/4/2018	72141	\$ 879.73
4535	0214301060101056	ECLIPSE MEDICAL IMAGING PC	3/19/2018	NF-3 Bill Form / HCFA 1500 Form	2/5/2018	73721	\$ 878.67
4536	0521169530101032	ECLIPSE MEDICAL IMAGING PC	3/19/2018	NF-3 Bill Form / HCFA 1500 Form	2/4/2018	72141	\$ 879.73
4537	0559832810101015	ECLIPSE MEDICAL IMAGING PC	3/19/2018	NF-3 Bill Form / HCFA 1500 Form	2/4/2018	72141	\$ 879.73
4538	0521169530101032	ECLIPSE MEDICAL IMAGING PC	3/19/2018	NF-3 Bill Form / HCFA 1500 Form	2/4/2018	72148	\$ 912.00
4539	0423424790101035	ECLIPSE MEDICAL IMAGING PC	3/19/2018	NF-3 Bill Form / HCFA 1500 Form	2/5/2018	72141	\$ 879.73
4540	0423424790101035	ECLIPSE MEDICAL IMAGING PC	3/19/2018	NF-3 Bill Form / HCFA 1500 Form	2/5/2018	73721	\$ 659.00
4541	0269043950101192	ECLIPSE MEDICAL IMAGING PC	3/19/2018	NF-3 Bill Form / HCFA 1500 Form	2/5/2018	72141	\$ 879.73
4542	0567540920101029	ECLIPSE MEDICAL IMAGING PC	3/19/2018	NF-3 Bill Form / HCFA 1500 Form	2/5/2018	73721	\$ 878.67
4543	0451245360101088	ECLIPSE MEDICAL IMAGING PC	3/22/2018	NF-3 Bill Form / HCFA 1500 Form	2/6/2018	72141	\$ 659.79
4544	0451245360101088	ECLIPSE MEDICAL IMAGING PC	3/22/2018	NF-3 Bill Form / HCFA 1500 Form	2/6/2018	72148	\$ 912.00
4545	0417030150101024	ECLIPSE MEDICAL IMAGING PC	3/22/2018	NF-3 Bill Form / HCFA 1500 Form	2/6/2018	72170	\$ 76.71
4546	0417030150101024	ECLIPSE MEDICAL IMAGING PC	3/22/2018	NF-3 Bill Form / HCFA 1500 Form	2/6/2018	72070	\$ 93.10
4547	0417030150101024	ECLIPSE MEDICAL IMAGING PC	3/22/2018	NF-3 Bill Form / HCFA 1500 Form	2/6/2018	73030	\$ 71.02
4548	0542923850101021	ECLIPSE MEDICAL IMAGING PC	3/23/2018	NF-3 Bill Form / HCFA 1500 Form	2/7/2018	73221	\$ 878.67
4549	0075009930101218	ECLIPSE MEDICAL IMAGING PC	3/23/2018	NF-3 Bill Form / HCFA 1500 Form	2/7/2018	72070	\$ 69.82
4550	0075009930101218	ECLIPSE MEDICAL IMAGING PC	3/23/2018	NF-3 Bill Form / HCFA 1500 Form	2/7/2018	72170	\$ 57.54

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Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
4551	0075009930101218	ECLIPSE MEDICAL IMAGING PC	3/23/2018	NF-3 Bill Form / HCFA 1500 Form	2/7/2018	73030	\$ 94.69
4552	0075009930101218	ECLIPSE MEDICAL IMAGING PC	3/23/2018	NF-3 Bill Form / HCFA 1500 Form	2/7/2018	73510	\$ 62.68
4553	0488319220101096	ECLIPSE MEDICAL IMAGING PC	3/23/2018	NF-3 Bill Form / HCFA 1500 Form	2/7/2018	72148	\$ 912.00
4554	0609381600101017	ECLIPSE MEDICAL IMAGING PC	3/23/2018	NF-3 Bill Form / HCFA 1500 Form	2/7/2018	72148	\$ 912.00
4555	0609381600101017	ECLIPSE MEDICAL IMAGING PC	3/23/2018	NF-3 Bill Form / HCFA 1500 Form	2/7/2018	72141	\$ 659.79
4556	0451331700101044	ECLIPSE MEDICAL IMAGING PC	3/26/2018	NF-3 Bill Form / HCFA 1500 Form	2/9/2018	72141	\$ 659.79
4557	0451331700101044	ECLIPSE MEDICAL IMAGING PC	3/26/2018	NF-3 Bill Form / HCFA 1500 Form	2/9/2018	72148	\$ 912.00
4558	0108538720101054	ECLIPSE MEDICAL IMAGING PC	3/26/2018	NF-3 Bill Form / HCFA 1500 Form	2/11/2018	72148	\$ 912.00
4559	0613601190101026	ECLIPSE MEDICAL IMAGING PC	3/26/2018	NF-3 Bill Form / HCFA 1500 Form	2/9/2018	73221	\$ 878.67
4560	0423424790101035	ECLIPSE MEDICAL IMAGING PC	3/26/2018	NF-3 Bill Form / HCFA 1500 Form	2/9/2018	73221	\$ 659.00
4561	0423424790101035	ECLIPSE MEDICAL IMAGING PC	3/26/2018	NF-3 Bill Form / HCFA 1500 Form	2/9/2018	72148	\$ 912.00
4562	0145120510101068	ECLIPSE MEDICAL IMAGING PC	3/26/2018	NF-3 Bill Form / HCFA 1500 Form	2/11/2018	72148	\$ 912.00
4563	0145120510101068	ECLIPSE MEDICAL IMAGING PC	3/26/2018	NF-3 Bill Form / HCFA 1500 Form	2/11/2018	72141	\$ 659.79
4564	0271760110101053	ECLIPSE MEDICAL IMAGING PC	3/26/2018	NF-3 Bill Form / HCFA 1500 Form	2/9/2018	73721	\$ 878.67
4565	0613601190101026	ECLIPSE MEDICAL IMAGING PC	3/26/2018	NF-3 Bill Form / HCFA 1500 Form	2/11/2018	72141	\$ 879.73
4566	0093566100101086	ECLIPSE MEDICAL IMAGING PC	3/26/2018	NF-3 Bill Form / HCFA 1500 Form	2/8/2018	70551	\$ 874.44
4567	0093566100101086	ECLIPSE MEDICAL IMAGING PC	3/26/2018	NF-3 Bill Form / HCFA 1500 Form	2/8/2018	73560	\$ 55.54
4568	0561649140101036	ECLIPSE MEDICAL IMAGING PC	3/26/2018	NF-3 Bill Form / HCFA 1500 Form	2/9/2018	72131	\$ 581.90
4569	0501517700101022	ECLIPSE MEDICAL IMAGING PC	3/26/2018	NF-3 Bill Form / HCFA 1500 Form	2/9/2018	73721	\$ 878.67
4570	0423424790101035	ECLIPSE MEDICAL IMAGING PC	3/26/2018	NF-3 Bill Form / HCFA 1500 Form	2/11/2018	72141	\$ 879.73
4571	0214301060101056	ECLIPSE MEDICAL IMAGING PC	3/26/2018	NF-3 Bill Form / HCFA 1500 Form	2/8/2018	74176	\$ 373.47
4572	0423424790101035	ECLIPSE MEDICAL IMAGING PC	3/26/2018	NF-3 Bill Form / HCFA 1500 Form	2/11/2018	72148	\$ 912.00
4573	0606552330101013	ECLIPSE MEDICAL IMAGING PC	3/26/2018	NF-3 Bill Form / HCFA 1500 Form	2/11/2018	73721	\$ 878.67
4574	0300254150101020	ECLIPSE MEDICAL IMAGING PC	3/26/2018	NF-3 Bill Form / HCFA 1500 Form	2/9/2018	72148	\$ 912.00
4575	0604171150101037	ECLIPSE MEDICAL IMAGING PC	3/27/2018	NF-3 Bill Form / HCFA 1500 Form	2/11/2018	72141	\$ 659.79
4576	0604171150101037	ECLIPSE MEDICAL IMAGING PC	3/27/2018	NF-3 Bill Form / HCFA 1500 Form	2/11/2018	72148	\$ 912.00
4577	0190080490101062	ECLIPSE MEDICAL IMAGING PC	3/29/2018	NF-3 Bill Form / HCFA 1500 Form	2/12/2018	73721	\$ 878.67
4578	0324076690101091	ECLIPSE MEDICAL IMAGING PC	3/29/2018	NF-3 Bill Form / HCFA 1500 Form	2/12/2018	73200	\$ 486.68
4579	0447209590101034	ECLIPSE MEDICAL IMAGING PC	4/2/2018	NF-3 Bill Form / HCFA 1500 Form	2/18/2018	73721	\$ 878.67
4580	0149644040101054	ECLIPSE MEDICAL IMAGING PC	4/2/2018	NF-3 Bill Form / HCFA 1500 Form	2/16/2018	72141	\$ 879.73
4581	0149644040101054	ECLIPSE MEDICAL IMAGING PC	4/2/2018	NF-3 Bill Form / HCFA 1500 Form	2/16/2018	73721	\$ 659.00
4582	0457528250101043	ECLIPSE MEDICAL IMAGING PC	4/2/2018	NF-3 Bill Form / HCFA 1500 Form	2/18/2018	72141	\$ 879.73
4583	0271760110101053	ECLIPSE MEDICAL IMAGING PC	4/2/2018	NF-3 Bill Form / HCFA 1500 Form	2/16/2018	73721	\$ 878.67
4584	0344337680101053	ECLIPSE MEDICAL IMAGING PC	4/2/2018	NF-3 Bill Form / HCFA 1500 Form	2/19/2018	72070	\$ 69.82
4585	0344337680101053	ECLIPSE MEDICAL IMAGING PC	4/2/2018	NF-3 Bill Form / HCFA 1500 Form	2/19/2018	72148	\$ 912.00
4586	0344337680101053	ECLIPSE MEDICAL IMAGING PC	4/2/2018	NF-3 Bill Form / HCFA 1500 Form	2/19/2018	72141	\$ 659.79
4587	0209348140101066	ECLIPSE MEDICAL IMAGING PC	4/2/2018	NF-3 Bill Form / HCFA 1500 Form	2/14/2018	73030	\$ 94.69
4588	0209348140101066	ECLIPSE MEDICAL IMAGING PC	4/2/2018	NF-3 Bill Form / HCFA 1500 Form	2/14/2018	72070	\$ 69.82
4589	0209348140101066	ECLIPSE MEDICAL IMAGING PC	4/2/2018	NF-3 Bill Form / HCFA 1500 Form	2/14/2018	72170	\$ 57.54
4590	0406981450101010	ECLIPSE MEDICAL IMAGING PC	4/2/2018	NF-3 Bill Form / HCFA 1500 Form	2/15/2018	73221	\$ 878.67
4591	0553781320101021	ECLIPSE MEDICAL IMAGING PC	4/2/2018	NF-3 Bill Form / HCFA 1500 Form	2/13/2018	73221	\$ 878.67
4592	0553781320101021	ECLIPSE MEDICAL IMAGING PC	4/2/2018	NF-3 Bill Form / HCFA 1500 Form	2/13/2018	73721	\$ 659.00
4593	0406981450101010	ECLIPSE MEDICAL IMAGING PC	4/6/2018	NF-3 Bill Form / HCFA 1500 Form	2/20/2018	73221	\$ 878.67
4594	0610798150101013	ECLIPSE MEDICAL IMAGING PC	4/9/2018	NF-3 Bill Form / HCFA 1500 Form	2/22/2018	73200	\$ 486.68
4595	0447209590101034	ECLIPSE MEDICAL IMAGING PC	4/9/2018	NF-3 Bill Form / HCFA 1500 Form	2/25/2018	73721	\$ 659.00
4596	0447209590101034	ECLIPSE MEDICAL IMAGING PC	4/9/2018	NF-3 Bill Form / HCFA 1500 Form	2/25/2018	72141	\$ 879.73
4597	0561649140101036	ECLIPSE MEDICAL IMAGING PC	4/9/2018	NF-3 Bill Form / HCFA 1500 Form	2/22/2018	73721	\$ 878.67
4598	0561649140101036	ECLIPSE MEDICAL IMAGING PC	4/9/2018	NF-3 Bill Form / HCFA 1500 Form	2/22/2018	73221	\$ 659.00
4599	0598863660101022	ECLIPSE MEDICAL IMAGING PC	4/9/2018	NF-3 Bill Form / HCFA 1500 Form	2/22/2018	72141	\$ 879.73
4600	0558728650101027	ECLIPSE MEDICAL IMAGING PC	4/9/2018	NF-3 Bill Form / HCFA 1500 Form	2/20/2018	73221	\$ 878.67
4601	0463318340101019	ECLIPSE MEDICAL IMAGING PC	4/9/2018	NF-3 Bill Form / HCFA 1500 Form	2/22/2018	73721	\$ 878.67
4602	0553781320101021	ECLIPSE MEDICAL IMAGING PC	4/9/2018	NF-3 Bill Form / HCFA 1500 Form	2/22/2018	73721	\$ 659.00
4603	0553781320101021	ECLIPSE MEDICAL IMAGING PC	4/9/2018	NF-3 Bill Form / HCFA 1500 Form	2/22/2018	73221	\$ 878.67
4604	0387304520101071	ECLIPSE MEDICAL IMAGING PC	4/9/2018	NF-3 Bill Form / HCFA 1500 Form	2/25/2018	73221	\$ 878.67
4605	0387304520101071	ECLIPSE MEDICAL IMAGING PC	4/9/2018	NF-3 Bill Form / HCFA 1500 Form	2/25/2018	73721	\$ 659.00
4606	0361762580101135	ECLIPSE MEDICAL IMAGING PC	4/9/2018	NF-3 Bill Form / HCFA 1500 Form	2/26/2018	73721	\$ 878.67
4607	0149644040101054	ECLIPSE MEDICAL IMAGING PC	4/9/2018	NF-3 Bill Form / HCFA 1500 Form	2/26/2018	72148	\$ 912.00
4608	0214301060101056	ECLIPSE MEDICAL IMAGING PC	4/9/2018	NF-3 Bill Form / HCFA 1500 Form	2/22/2018	72141	\$ 659.79
4609	0214301060101056	ECLIPSE MEDICAL IMAGING PC	4/9/2018	NF-3 Bill Form / HCFA 1500 Form	2/22/2018	72148	\$ 912.00
4610	0488319220101096	ECLIPSE MEDICAL IMAGING PC	4/9/2018	NF-3 Bill Form / HCFA 1500 Form	2/23/2018	73721	\$ 878.67
4611	0362845080101041	ECLIPSE MEDICAL IMAGING PC	4/9/2018	NF-3 Bill Form / HCFA 1500 Form	2/21/2018	73721	\$ 659.00
4612	0362845080101041	ECLIPSE MEDICAL IMAGING PC	4/9/2018	NF-3 Bill Form / HCFA 1500 Form	2/21/2018	73070	\$ 52.77
4613	0362845080101041	ECLIPSE MEDICAL IMAGING PC	4/9/2018	NF-3 Bill Form / HCFA 1500 Form	2/21/2018	73221	\$ 878.67
4614	0361762580101135	ECLIPSE MEDICAL IMAGING PC	4/10/2018	NF-3 Bill Form / HCFA 1500 Form	2/19/2018	72100	\$ 65.86
4615	0361762580101135	ECLIPSE MEDICAL IMAGING PC	4/10/2018	NF-3 Bill Form / HCFA 1500 Form	2/19/2018	72040	\$ 72.20
4616	0361762580101135	ECLIPSE MEDICAL IMAGING PC	4/10/2018	NF-3 Bill Form / HCFA 1500 Form	2/19/2018	73070	\$ 52.77
4617	0361762580101135	ECLIPSE MEDICAL IMAGING PC	4/10/2018	NF-3 Bill Form / HCFA 1500 Form	2/19/2018	73560	\$ 55.54
4618	0361762580101135	ECLIPSE MEDICAL IMAGING PC	4/10/2018	NF-3 Bill Form / HCFA 1500 Form	2/19/2018	73560	\$ 55.54
4619	0361762580101135	ECLIPSE MEDICAL IMAGING PC	4/10/2018	NF-3 Bill Form / HCFA 1500 Form	2/19/2018	73721	\$ 878.67
4620	0606552330101013	ECLIPSE MEDICAL IMAGING PC	4/12/2018	NF-3 Bill Form / HCFA 1500 Form	2/26/2018	73221	\$ 878.67

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Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
4621	0558728650101027	ECLIPSE MEDICAL IMAGING PC	4/12/2018	NF-3 Bill Form / HCFA 1500 Form	2/28/2018	72141	\$ 659.79
4622	0558728650101027	ECLIPSE MEDICAL IMAGING PC	4/12/2018	NF-3 Bill Form / HCFA 1500 Form	2/28/2018	72148	\$ 912.00
4623	0488319220101096	ECLIPSE MEDICAL IMAGING PC	4/16/2018	NF-3 Bill Form / HCFA 1500 Form	3/2/2018	72141	\$ 879.73
4624	0542923850101021	ECLIPSE MEDICAL IMAGING PC	4/16/2018	NF-3 Bill Form / HCFA 1500 Form	3/1/2018	72141	\$ 659.79
4625	0542923850101021	ECLIPSE MEDICAL IMAGING PC	4/16/2018	NF-3 Bill Form / HCFA 1500 Form	3/1/2018	72148	\$ 912.00
4626	0603159570101019	ECLIPSE MEDICAL IMAGING PC	4/16/2018	NF-3 Bill Form / HCFA 1500 Form	3/1/2018	73221	\$ 878.67
4627	0604057090101015	ECLIPSE MEDICAL IMAGING PC	4/16/2018	NF-3 Bill Form / HCFA 1500 Form	3/1/2018	73721	\$ 878.67
4628	0447209590101034	ECLIPSE MEDICAL IMAGING PC	4/16/2018	NF-3 Bill Form / HCFA 1500 Form	3/4/2018	72148	\$ 912.00
4629	0463318340101019	ECLIPSE MEDICAL IMAGING PC	4/16/2018	NF-3 Bill Form / HCFA 1500 Form	3/2/2018	72148	\$ 912.00
4630	0463318340101019	ECLIPSE MEDICAL IMAGING PC	4/16/2018	NF-3 Bill Form / HCFA 1500 Form	3/2/2018	72141	\$ 659.79
4631	0093566100101086	ECLIPSE MEDICAL IMAGING PC	4/17/2018	NF-3 Bill Form / HCFA 1500 Form	3/2/2018	72141	\$ 659.79
4632	0093566100101086	ECLIPSE MEDICAL IMAGING PC	4/17/2018	NF-3 Bill Form / HCFA 1500 Form	3/2/2018	72148	\$ 912.00
4633	0585374810101016	ECLIPSE MEDICAL IMAGING PC	4/19/2018	NF-3 Bill Form / HCFA 1500 Form	3/5/2018	72141	\$ 879.73
4634	0572304410101012	ECLIPSE MEDICAL IMAGING PC	4/19/2018	NF-3 Bill Form / HCFA 1500 Form	3/5/2018	73721	\$ 878.67
4635	0435497760101132	ECLIPSE MEDICAL IMAGING PC	4/19/2018	NF-3 Bill Form / HCFA 1500 Form	3/5/2018	73721	\$ 878.67
4636	0435497760101132	ECLIPSE MEDICAL IMAGING PC	4/19/2018	NF-3 Bill Form / HCFA 1500 Form	3/5/2018	73221	\$ 659.00
4637	0228136100101052	ECLIPSE MEDICAL IMAGING PC	4/20/2018	NF-3 Bill Form / HCFA 1500 Form	3/6/2018	73620	\$ 56.55
4638	0228136100101052	ECLIPSE MEDICAL IMAGING PC	4/20/2018	NF-3 Bill Form / HCFA 1500 Form	3/6/2018	73721	\$ 878.67
4639	0228136100101052	ECLIPSE MEDICAL IMAGING PC	4/20/2018	NF-3 Bill Form / HCFA 1500 Form	3/6/2018	73600	\$ 54.75
4640	0190080490101062	ECLIPSE MEDICAL IMAGING PC	4/20/2018	NF-3 Bill Form / HCFA 1500 Form	3/6/2018	72141	\$ 659.79
4641	0190080490101062	ECLIPSE MEDICAL IMAGING PC	4/20/2018	NF-3 Bill Form / HCFA 1500 Form	3/6/2018	72148	\$ 912.00
4642	0606803130101012	ECLIPSE MEDICAL IMAGING PC	4/20/2018	NF-3 Bill Form / HCFA 1500 Form	3/6/2018	72131	\$ 581.90
4643	0606803130101012	ECLIPSE MEDICAL IMAGING PC	4/20/2018	NF-3 Bill Form / HCFA 1500 Form	3/6/2018	72125	\$ 436.42
4644	0406981450101010	ECLIPSE MEDICAL IMAGING PC	4/20/2018	NF-3 Bill Form / HCFA 1500 Form	3/6/2018	72148	\$ 912.00
4645	0406981450101010	ECLIPSE MEDICAL IMAGING PC	4/20/2018	NF-3 Bill Form / HCFA 1500 Form	3/6/2018	72141	\$ 659.79
4646	0401265610101200	ECLIPSE MEDICAL IMAGING PC	4/23/2018	NF-3 Bill Form / HCFA 1500 Form	3/11/2018	72141	\$ 879.73
4647	0584325750101011	ECLIPSE MEDICAL IMAGING PC	4/23/2018	NF-3 Bill Form / HCFA 1500 Form	3/11/2018	72141	\$ 879.73
4648	0377175160101064	ECLIPSE MEDICAL IMAGING PC	4/23/2018	NF-3 Bill Form / HCFA 1500 Form	3/9/2018	72141	\$ 879.73
4649	0488319220101096	ECLIPSE MEDICAL IMAGING PC	4/23/2018	NF-3 Bill Form / HCFA 1500 Form	3/8/2018	73721	\$ 878.67
4650	0563286710101019	ECLIPSE MEDICAL IMAGING PC	4/23/2018	NF-3 Bill Form / HCFA 1500 Form	3/11/2018	73221	\$ 878.67
4651	0387304520101071	ECLIPSE MEDICAL IMAGING PC	4/23/2018	NF-3 Bill Form / HCFA 1500 Form	3/8/2018	72148	\$ 912.00
4652	0362845080101041	ECLIPSE MEDICAL IMAGING PC	4/26/2018	NF-3 Bill Form / HCFA 1500 Form	3/13/2018	72148	\$ 912.00
4653	0362845080101041	ECLIPSE MEDICAL IMAGING PC	4/26/2018	NF-3 Bill Form / HCFA 1500 Form	3/13/2018	72141	\$ 659.79
4654	0616207430101011	ECLIPSE MEDICAL IMAGING PC	4/26/2018	NF-3 Bill Form / HCFA 1500 Form	3/13/2018	73218	\$ 574.49
4655	0616207430101011	ECLIPSE MEDICAL IMAGING PC	4/26/2018	NF-3 Bill Form / HCFA 1500 Form	3/13/2018	73718	\$ 901.42
4656	0563286710101019	ECLIPSE MEDICAL IMAGING PC	4/26/2018	NF-3 Bill Form / HCFA 1500 Form	3/13/2018	73218	\$ 574.49
4657	0563286710101019	ECLIPSE MEDICAL IMAGING PC	4/26/2018	NF-3 Bill Form / HCFA 1500 Form	3/13/2018	73221	\$ 878.67
4658	0548672000101043	ECLIPSE MEDICAL IMAGING PC	4/27/2018	NF-3 Bill Form / HCFA 1500 Form	3/13/2018	73221	\$ 878.67
4659	0543721620101019	ECLIPSE MEDICAL IMAGING PC	4/30/2018	NF-3 Bill Form / HCFA 1500 Form	3/16/2018	72141	\$ 659.79
4660	0543721620101019	ECLIPSE MEDICAL IMAGING PC	4/30/2018	NF-3 Bill Form / HCFA 1500 Form	3/16/2018	72148	\$ 912.00
4661	0269043950101192	ECLIPSE MEDICAL IMAGING PC	4/30/2018	NF-3 Bill Form / HCFA 1500 Form	3/14/2018	73721	\$ 878.67
4662	0426663210101029	ECLIPSE MEDICAL IMAGING PC	4/30/2018	NF-3 Bill Form / HCFA 1500 Form	3/14/2018	73721	\$ 878.67
4663	0370173740101057	ECLIPSE MEDICAL IMAGING PC	4/30/2018	NF-3 Bill Form / HCFA 1500 Form	3/16/2018	72141	\$ 659.79
4664	0370173740101057	ECLIPSE MEDICAL IMAGING PC	4/30/2018	NF-3 Bill Form / HCFA 1500 Form	3/16/2018	72148	\$ 912.00
4665	0287216210101156	ECLIPSE MEDICAL IMAGING PC	4/30/2018	NF-3 Bill Form / HCFA 1500 Form	3/16/2018	73721	\$ 878.67
4666	0603443470101018	ECLIPSE MEDICAL IMAGING PC	4/30/2018	NF-3 Bill Form / HCFA 1500 Form	3/16/2018	72141	\$ 879.73
4667	0228136100101052	ECLIPSE MEDICAL IMAGING PC	4/30/2018	NF-3 Bill Form / HCFA 1500 Form	3/15/2018	73721	\$ 878.67
4668	0563286710101019	ECLIPSE MEDICAL IMAGING PC	4/30/2018	NF-3 Bill Form / HCFA 1500 Form	3/18/2018	73221	\$ 878.67
4669	0279065020101108	ECLIPSE MEDICAL IMAGING PC	4/30/2018	NF-3 Bill Form / HCFA 1500 Form	3/18/2018	73721	\$ 878.67
4670	0279065020101108	ECLIPSE MEDICAL IMAGING PC	4/30/2018	NF-3 Bill Form / HCFA 1500 Form	3/18/2018	73221	\$ 659.00
4671	0370173740101057	ECLIPSE MEDICAL IMAGING PC	4/30/2018	NF-3 Bill Form / HCFA 1500 Form	3/18/2018	72148	\$ 912.00
4672	0370173740101057	ECLIPSE MEDICAL IMAGING PC	4/30/2018	NF-3 Bill Form / HCFA 1500 Form	3/18/2018	72141	\$ 659.79
4673	0537189930101020	ECLIPSE MEDICAL IMAGING PC	5/3/2018	NF-3 Bill Form / HCFA 1500 Form	3/19/2018	73721	\$ 878.67
4674	0361762580101135	ECLIPSE MEDICAL IMAGING PC	5/3/2018	NF-3 Bill Form / HCFA 1500 Form	3/19/2018	72148	\$ 912.00
4675	0361762580101135	ECLIPSE MEDICAL IMAGING PC	5/3/2018	NF-3 Bill Form / HCFA 1500 Form	3/19/2018	72141	\$ 659.79
4676	0279065020101108	ECLIPSE MEDICAL IMAGING PC	5/4/2018	NF-3 Bill Form / HCFA 1500 Form	3/22/2018	72148	\$ 912.00
4677	0279065020101108	ECLIPSE MEDICAL IMAGING PC	5/4/2018	NF-3 Bill Form / HCFA 1500 Form	3/22/2018	72125	\$ 436.42
4678	0228136100101052	ECLIPSE MEDICAL IMAGING PC	5/4/2018	NF-3 Bill Form / HCFA 1500 Form	3/21/2018	72141	\$ 879.73
4679	0580899530101016	ECLIPSE MEDICAL IMAGING PC	5/4/2018	NF-3 Bill Form / HCFA 1500 Form	3/22/2018	72148	\$ 912.00
4680	0228136100101052	ECLIPSE MEDICAL IMAGING PC	5/4/2018	NF-3 Bill Form / HCFA 1500 Form	3/23/2018	73721	\$ 659.00
4681	0228136100101052	ECLIPSE MEDICAL IMAGING PC	5/4/2018	NF-3 Bill Form / HCFA 1500 Form	3/23/2018	72148	\$ 912.00
4682	0550817320101018	ECLIPSE MEDICAL IMAGING PC	5/8/2018	NF-3 Bill Form / HCFA 1500 Form	3/26/2018	73721	\$ 878.67
4683	0228136100101052	ECLIPSE MEDICAL IMAGING PC	5/8/2018	NF-3 Bill Form / HCFA 1500 Form	3/26/2018	73718	\$ 901.42
4684	0093070320101133	ECLIPSE MEDICAL IMAGING PC	5/9/2018	NF-3 Bill Form / HCFA 1500 Form	3/26/2018	72141	\$ 879.73
4685	0093070320101133	ECLIPSE MEDICAL IMAGING PC	5/9/2018	NF-3 Bill Form / HCFA 1500 Form	3/26/2018	73721	\$ 659.00
4686	0423424790101035	ECLIPSE MEDICAL IMAGING PC	5/9/2018	NF-3 Bill Form / HCFA 1500 Form	3/25/2018	73221	\$ 878.67
4687	0435497760101132	ECLIPSE MEDICAL IMAGING PC	5/10/2018	NF-3 Bill Form / HCFA 1500 Form	3/27/2018	72148	\$ 912.00
4688	0435497760101132	ECLIPSE MEDICAL IMAGING PC	5/10/2018	NF-3 Bill Form / HCFA 1500 Form	3/27/2018	72141	\$ 659.79
4689	0614256430101028	ECLIPSE MEDICAL IMAGING PC	5/10/2018	NF-3 Bill Form / HCFA 1500 Form	3/27/2018	73221	\$ 878.67
4690	0590515690101020	ECLIPSE MEDICAL IMAGING PC	5/14/2018	NF-3 Bill Form / HCFA 1500 Form	3/29/2018	72141	\$ 659.79

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Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
4691	0590515690101020	ECLIPSE MEDICAL IMAGING PC	5/14/2018	NF-3 Bill Form / HCFA 1500 Form	3/29/2018	72148	\$ 912.00
4692	0370173740101057	ECLIPSE MEDICAL IMAGING PC	5/14/2018	NF-3 Bill Form / HCFA 1500 Form	3/30/2018	73221	\$ 878.67
4693	0163651410101078	ECLIPSE MEDICAL IMAGING PC	5/14/2018	NF-3 Bill Form / HCFA 1500 Form	4/2/2018	73221	\$ 659.00
4694	0163651410101078	ECLIPSE MEDICAL IMAGING PC	5/14/2018	NF-3 Bill Form / HCFA 1500 Form	4/2/2018	73718	\$ 901.42
4695	0370173740101057	ECLIPSE MEDICAL IMAGING PC	5/14/2018	NF-3 Bill Form / HCFA 1500 Form	4/2/2018	73221	\$ 878.67
4696	0324076690101091	ECLIPSE MEDICAL IMAGING PC	5/14/2018	NF-3 Bill Form / HCFA 1500 Form	4/2/2018	73721	\$ 878.67
4697	0485706420101012	ECLIPSE MEDICAL IMAGING PC	5/14/2018	NF-3 Bill Form / HCFA 1500 Form	4/4/2018	73721	\$ 878.67
4698	0485706420101012	ECLIPSE MEDICAL IMAGING PC	5/14/2018	NF-3 Bill Form / HCFA 1500 Form	4/4/2018	73221	\$ 878.67
4699	0370173740101057	ECLIPSE MEDICAL IMAGING PC	5/14/2018	NF-3 Bill Form / HCFA 1500 Form	4/5/2018	73721	\$ 878.67
4700	0459248120101051	ECLIPSE MEDICAL IMAGING PC	5/14/2018	NF-3 Bill Form / HCFA 1500 Form	4/3/2018	73721	\$ 878.67
4701	0093070320101133	ECLIPSE MEDICAL IMAGING PC	5/14/2018	NF-3 Bill Form / HCFA 1500 Form	4/2/2018	73221	\$ 659.00
4702	0093070320101133	ECLIPSE MEDICAL IMAGING PC	5/14/2018	NF-3 Bill Form / HCFA 1500 Form	4/2/2018	72148	\$ 912.00
4703	0550817340101018	ECLIPSE MEDICAL IMAGING PC	5/15/2018	NF-3 Bill Form / HCFA 1500 Form	3/28/2018	73510	\$ 83.58
4704	0535207400101023	ECLIPSE MEDICAL IMAGING PC	5/15/2018	NF-3 Bill Form / HCFA 1500 Form	4/2/2018	73030	\$ 94.69
4705	0535207400101023	ECLIPSE MEDICAL IMAGING PC	5/15/2018	NF-3 Bill Form / HCFA 1500 Form	4/2/2018	72170	\$ 57.54
4706	0535207400101023	ECLIPSE MEDICAL IMAGING PC	5/15/2018	NF-3 Bill Form / HCFA 1500 Form	4/2/2018	72070	\$ 69.82
4707	0605354750101016	ECLIPSE MEDICAL IMAGING PC	5/18/2018	NF-3 Bill Form / HCFA 1500 Form	4/6/2018	73221	\$ 878.67
4708	0591691990101017	ECLIPSE MEDICAL IMAGING PC	5/21/2018	NF-3 Bill Form / HCFA 1500 Form	4/8/2018	72148	\$ 912.00
4709	0591691990101017	ECLIPSE MEDICAL IMAGING PC	5/21/2018	NF-3 Bill Form / HCFA 1500 Form	4/8/2018	72141	\$ 879.73
4710	0467717660101028	ECLIPSE MEDICAL IMAGING PC	5/21/2018	NF-3 Bill Form / HCFA 1500 Form	4/9/2018	73721	\$ 878.67
4711	0546497420101049	ECLIPSE MEDICAL IMAGING PC	5/22/2018	NF-3 Bill Form / HCFA 1500 Form	4/9/2018	73620	\$ 56.73
4712	0546497420101049	ECLIPSE MEDICAL IMAGING PC	5/22/2018	NF-3 Bill Form / HCFA 1500 Form	4/9/2018	72070	\$ 69.82
4713	0546497420101049	ECLIPSE MEDICAL IMAGING PC	5/22/2018	NF-3 Bill Form / HCFA 1500 Form	4/9/2018	72100	\$ 65.86
4714	0546497420101049	ECLIPSE MEDICAL IMAGING PC	5/22/2018	NF-3 Bill Form / HCFA 1500 Form	4/9/2018	72040	\$ 96.27
4715	0546497420101049	ECLIPSE MEDICAL IMAGING PC	5/22/2018	NF-3 Bill Form / HCFA 1500 Form	4/9/2018	73620	\$ 56.73
4716	0525593890101058	ECLIPSE MEDICAL IMAGING PC	5/29/2018	NF-3 Bill Form / HCFA 1500 Form	4/12/2018	73221	\$ 878.67
4717	0322755760101055	ECLIPSE MEDICAL IMAGING PC	5/29/2018	NF-3 Bill Form / HCFA 1500 Form	4/12/2018	73721	\$ 878.67
4718	0603443470101018	ECLIPSE MEDICAL IMAGING PC	5/29/2018	NF-3 Bill Form / HCFA 1500 Form	4/16/2018	72148	\$ 912.00
4719	0603443470101018	ECLIPSE MEDICAL IMAGING PC	5/29/2018	NF-3 Bill Form / HCFA 1500 Form	4/16/2018	73120	\$ 47.61
4720	0525593890101058	ECLIPSE MEDICAL IMAGING PC	5/29/2018	NF-3 Bill Form / HCFA 1500 Form	4/10/2018	73721	\$ 878.67
4721	0525593890101058	ECLIPSE MEDICAL IMAGING PC	5/29/2018	NF-3 Bill Form / HCFA 1500 Form	4/10/2018	73221	\$ 659.00
4722	0130825530101164	ECLIPSE MEDICAL IMAGING PC	5/29/2018	NF-3 Bill Form / HCFA 1500 Form	4/15/2018	73721	\$ 878.67
4723	0492754990101096	ECLIPSE MEDICAL IMAGING PC	5/29/2018	NF-3 Bill Form / HCFA 1500 Form	4/16/2018	72148	\$ 912.00
4724	0492754990101096	ECLIPSE MEDICAL IMAGING PC	5/29/2018	NF-3 Bill Form / HCFA 1500 Form	4/16/2018	72141	\$ 659.79
4725	0130825530101164	ECLIPSE MEDICAL IMAGING PC	5/29/2018	NF-3 Bill Form / HCFA 1500 Form	4/15/2018	73221	\$ 878.67
4726	0590678200101011	ECLIPSE MEDICAL IMAGING PC	5/29/2018	NF-3 Bill Form / HCFA 1500 Form	4/12/2018	73721	\$ 878.67
4727	0324076690101091	ECLIPSE MEDICAL IMAGING PC	5/29/2018	NF-3 Bill Form / HCFA 1500 Form	4/17/2018	72148	\$ 912.00
4728	0459248120101051	ECLIPSE MEDICAL IMAGING PC	5/29/2018	NF-3 Bill Form / HCFA 1500 Form	4/17/2018	73221	\$ 878.67
4729	0550817320101018	ECLIPSE MEDICAL IMAGING PC	5/29/2018	NF-3 Bill Form / HCFA 1500 Form	4/17/2018	73221	\$ 878.67
4730	0492754990101096	ECLIPSE MEDICAL IMAGING PC	5/29/2018	NF-3 Bill Form / HCFA 1500 Form	4/12/2018	73221	\$ 878.67
4731	0266213410101123	ECLIPSE MEDICAL IMAGING PC	5/29/2018	NF-3 Bill Form / HCFA 1500 Form	4/12/2018	73221	\$ 878.67
4732	0590678200101011	ECLIPSE MEDICAL IMAGING PC	5/29/2018	NF-3 Bill Form / HCFA 1500 Form	4/12/2018	72141	\$ 879.73
4733	0492754990101096	ECLIPSE MEDICAL IMAGING PC	5/29/2018	NF-3 Bill Form / HCFA 1500 Form	4/12/2018	73221	\$ 878.67
4734	0566949490101072	ECLIPSE MEDICAL IMAGING PC	5/29/2018	NF-3 Bill Form / HCFA 1500 Form	4/13/2018	73221	\$ 878.67
4735	0550817320101018	ECLIPSE MEDICAL IMAGING PC	5/29/2018	NF-3 Bill Form / HCFA 1500 Form	4/13/2018	72141	\$ 659.79
4736	0550817320101018	ECLIPSE MEDICAL IMAGING PC	5/29/2018	NF-3 Bill Form / HCFA 1500 Form	4/13/2018	72148	\$ 912.00
4737	0343928700101106	ECLIPSE MEDICAL IMAGING PC	5/29/2018	NF-3 Bill Form / HCFA 1500 Form	4/13/2018	73721	\$ 878.67
4738	0600424430101010	ECLIPSE MEDICAL IMAGING PC	5/29/2018	NF-3 Bill Form / HCFA 1500 Form	4/12/2018	73221	\$ 878.67
4739	0332149850101050	ECLIPSE MEDICAL IMAGING PC	6/4/2018	NF-3 Bill Form / HCFA 1500 Form	4/19/2018	72148	\$ 912.00
4740	0332149850101050	ECLIPSE MEDICAL IMAGING PC	6/4/2018	NF-3 Bill Form / HCFA 1500 Form	4/19/2018	72141	\$ 659.79
4741	0594944240101031	ECLIPSE MEDICAL IMAGING PC	6/4/2018	NF-3 Bill Form / HCFA 1500 Form	4/19/2018	73721	\$ 878.67
4742	0485706420101012	ECLIPSE MEDICAL IMAGING PC	6/4/2018	NF-3 Bill Form / HCFA 1500 Form	4/20/2018	72141	\$ 879.73
4743	0485706420101012	ECLIPSE MEDICAL IMAGING PC	6/4/2018	NF-3 Bill Form / HCFA 1500 Form	4/20/2018	72148	\$ 912.00
4744	0492754990101096	ECLIPSE MEDICAL IMAGING PC	6/4/2018	NF-3 Bill Form / HCFA 1500 Form	4/18/2018	72148	\$ 912.00
4745	0492754990101096	ECLIPSE MEDICAL IMAGING PC	6/4/2018	NF-3 Bill Form / HCFA 1500 Form	4/18/2018	72141	\$ 659.79
4746	0594944240101031	ECLIPSE MEDICAL IMAGING PC	6/4/2018	NF-3 Bill Form / HCFA 1500 Form	4/19/2018	73221	\$ 878.67
4747	0580051990101033	ECLIPSE MEDICAL IMAGING PC	6/4/2018	NF-3 Bill Form / HCFA 1500 Form	4/19/2018	73200	\$ 365.01
4748	0580051990101033	ECLIPSE MEDICAL IMAGING PC	6/4/2018	NF-3 Bill Form / HCFA 1500 Form	4/19/2018	73700	\$ 486.68
4749	0467717660101028	ECLIPSE MEDICAL IMAGING PC	6/4/2018	NF-3 Bill Form / HCFA 1500 Form	4/20/2018	72148	\$ 912.00
4750	0467717660101028	ECLIPSE MEDICAL IMAGING PC	6/4/2018	NF-3 Bill Form / HCFA 1500 Form	4/20/2018	73721	\$ 659.00
4751	0163651410101078	ECLIPSE MEDICAL IMAGING PC	6/4/2018	NF-3 Bill Form / HCFA 1500 Form	4/22/2018	72148	\$ 912.00
4752	0163651410101078	ECLIPSE MEDICAL IMAGING PC	6/4/2018	NF-3 Bill Form / HCFA 1500 Form	4/22/2018	72141	\$ 659.79
4753	0581156200101019	ECLIPSE MEDICAL IMAGING PC	6/4/2018	NF-3 Bill Form / HCFA 1500 Form	4/19/2018	72148	\$ 912.00
4754	0581156200101019	ECLIPSE MEDICAL IMAGING PC	6/4/2018	NF-3 Bill Form / HCFA 1500 Form	4/19/2018	72141	\$ 659.79
4755	0463318340101019	ECLIPSE MEDICAL IMAGING PC	6/4/2018	NF-3 Bill Form / HCFA 1500 Form	4/19/2018	72146	\$ 959.61
4756	0605354750101016	ECLIPSE MEDICAL IMAGING PC	6/7/2018	NF-3 Bill Form / HCFA 1500 Form	4/23/2018	72141	\$ 659.79
4757	0605354750101016	ECLIPSE MEDICAL IMAGING PC	6/7/2018	NF-3 Bill Form / HCFA 1500 Form	4/23/2018	72148	\$ 912.00
4758	0581156200101019	ECLIPSE MEDICAL IMAGING PC	6/7/2018	NF-3 Bill Form / HCFA 1500 Form	4/23/2018	73221	\$ 878.67
4759	0594944240101031	ECLIPSE MEDICAL IMAGING PC	6/7/2018	NF-3 Bill Form / HCFA 1500 Form	4/24/2018	73721	\$ 878.67
4760	0560016700101023	ECLIPSE MEDICAL IMAGING PC	6/7/2018	NF-3 Bill Form / HCFA 1500 Form	4/24/2018	73221	\$ 878.67

Government Employees Insurance Company, et al v. Eclipse Medical Imaging, et al
Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
4761	0594944240101031	ECLIPSE MEDICAL IMAGING PC	6/7/2018	NF-3 Bill Form / HCFA 1500 Form	4/24/2018	73221	\$ 878.67
4762	0343928700101106	ECLIPSE MEDICAL IMAGING PC	6/7/2018	NF-3 Bill Form / HCFA 1500 Form	4/24/2018	73721	\$ 878.67
4763	0343928700101106	ECLIPSE MEDICAL IMAGING PC	6/7/2018	NF-3 Bill Form / HCFA 1500 Form	4/24/2018	73221	\$ 659.00
4764	0523437130101027	ECLIPSE MEDICAL IMAGING PC	6/7/2018	NF-3 Bill Form / HCFA 1500 Form	4/23/2018	73221	\$ 878.67
4765	0607757020101012	ECLIPSE MEDICAL IMAGING PC	6/7/2018	NF-3 Bill Form / HCFA 1500 Form	4/23/2018	73718	\$ 901.42
4766	0607757020101012	ECLIPSE MEDICAL IMAGING PC	6/7/2018	NF-3 Bill Form / HCFA 1500 Form	4/23/2018	72100	\$ 65.86
4767	0607757020101012	ECLIPSE MEDICAL IMAGING PC	6/7/2018	NF-3 Bill Form / HCFA 1500 Form	4/23/2018	73221	\$ 659.00
4768	0607757020101012	ECLIPSE MEDICAL IMAGING PC	6/7/2018	NF-3 Bill Form / HCFA 1500 Form	4/23/2018	72040	\$ 72.20
4769	0523437130101027	ECLIPSE MEDICAL IMAGING PC	6/11/2018	NF-3 Bill Form / HCFA 1500 Form	4/24/2018	73221	\$ 878.67
4770	0420031350101025	ECLIPSE MEDICAL IMAGING PC	6/11/2018	NF-3 Bill Form / HCFA 1500 Form	4/30/2018	73221	\$ 878.67
4771	0523437130101027	ECLIPSE MEDICAL IMAGING PC	6/11/2018	NF-3 Bill Form / HCFA 1500 Form	4/24/2018	73721	\$ 878.67
4772	0603443470101018	ECLIPSE MEDICAL IMAGING PC	6/11/2018	NF-3 Bill Form / HCFA 1500 Form	4/30/2018	73221	\$ 878.67
4773	0563937620101016	ECLIPSE MEDICAL IMAGING PC	6/11/2018	NF-3 Bill Form / HCFA 1500 Form	4/26/2018	73700	\$ 365.01
4774	0563937620101016	ECLIPSE MEDICAL IMAGING PC	6/11/2018	NF-3 Bill Form / HCFA 1500 Form	4/26/2018	73700	\$ 486.68
4775	0566949490101072	ECLIPSE MEDICAL IMAGING PC	6/11/2018	NF-3 Bill Form / HCFA 1500 Form	4/29/2018	72148	\$ 912.00
4776	0546497420101049	ECLIPSE MEDICAL IMAGING PC	6/11/2018	NF-3 Bill Form / HCFA 1500 Form	4/29/2018	72141	\$ 659.79
4777	0546497420101049	ECLIPSE MEDICAL IMAGING PC	6/11/2018	NF-3 Bill Form / HCFA 1500 Form	4/29/2018	72148	\$ 912.00
4778	0523437130101027	ECLIPSE MEDICAL IMAGING PC	6/11/2018	NF-3 Bill Form / HCFA 1500 Form	4/26/2018	73221	\$ 878.67
4779	0525593890101058	ECLIPSE MEDICAL IMAGING PC	6/11/2018	NF-3 Bill Form / HCFA 1500 Form	4/24/2018	72141	\$ 659.79
4780	0525593890101058	ECLIPSE MEDICAL IMAGING PC	6/11/2018	NF-3 Bill Form / HCFA 1500 Form	4/24/2018	72148	\$ 912.00
4781	0563937620101016	ECLIPSE MEDICAL IMAGING PC	6/11/2018	NF-3 Bill Form / HCFA 1500 Form	4/30/2018	72125	\$ 581.90
4782	0563937620101016	ECLIPSE MEDICAL IMAGING PC	6/11/2018	NF-3 Bill Form / HCFA 1500 Form	4/30/2018	73700	\$ 365.01
4783	0581862850101031	ECLIPSE MEDICAL IMAGING PC	6/11/2018	NF-3 Bill Form / HCFA 1500 Form	4/25/2018	73221	\$ 878.67
4784	0581862850101031	ECLIPSE MEDICAL IMAGING PC	6/11/2018	NF-3 Bill Form / HCFA 1500 Form	4/25/2018	73221	\$ 878.67
4785	0538399680101034	ECLIPSE MEDICAL IMAGING PC	6/11/2018	NF-3 Bill Form / HCFA 1500 Form	4/27/2018	73721	\$ 878.67
4786	0471183260101013	ECLIPSE MEDICAL IMAGING PC	6/14/2018	NF-3 Bill Form / HCFA 1500 Form	5/3/2018	73200	\$ 486.68
4787	0130825530101164	ECLIPSE MEDICAL IMAGING PC	6/14/2018	NF-3 Bill Form / HCFA 1500 Form	5/1/2018	72148	\$ 912.00
4788	0130825530101164	ECLIPSE MEDICAL IMAGING PC	6/14/2018	NF-3 Bill Form / HCFA 1500 Form	5/3/2018	72125	\$ 581.90
4789	0551888810101049	ECLIPSE MEDICAL IMAGING PC	6/14/2018	NF-3 Bill Form / HCFA 1500 Form	5/3/2018	73700	\$ 365.01
4790	0551888810101049	ECLIPSE MEDICAL IMAGING PC	6/14/2018	NF-3 Bill Form / HCFA 1500 Form	5/3/2018	73721	\$ 878.67
4791	0322755760101055	ECLIPSE MEDICAL IMAGING PC	6/14/2018	NF-3 Bill Form / HCFA 1500 Form	5/3/2018	72148	\$ 912.00
4792	0130825530101164	ECLIPSE MEDICAL IMAGING PC	6/14/2018	NF-3 Bill Form / HCFA 1500 Form	5/1/2018	72141	\$ 879.73
4793	0488337460101048	ECLIPSE MEDICAL IMAGING PC	6/14/2018	NF-3 Bill Form / HCFA 1500 Form	5/1/2018	72125	\$ 581.90
4794	0417911510101053	ECLIPSE MEDICAL IMAGING PC	6/14/2018	NF-3 Bill Form / HCFA 1500 Form	5/1/2018	72148	\$ 912.00
4795	0361762580101135	ECLIPSE MEDICAL IMAGING PC	6/14/2018	NF-3 Bill Form / HCFA 1500 Form	5/2/2018	73221	\$ 878.67
4796	0583397550101021	ECLIPSE MEDICAL IMAGING PC	6/14/2018	NF-3 Bill Form / HCFA 1500 Form	5/3/2018	72141	\$ 879.73
4797	0266213410101123	ECLIPSE MEDICAL IMAGING PC	6/15/2018	NF-3 Bill Form / HCFA 1500 Form	5/4/2018	72148	\$ 912.00
4798	0266213410101123	ECLIPSE MEDICAL IMAGING PC	6/15/2018	NF-3 Bill Form / HCFA 1500 Form	5/4/2018	72141	\$ 659.79
4799	0488337460101048	ECLIPSE MEDICAL IMAGING PC	6/15/2018	NF-3 Bill Form / HCFA 1500 Form	5/6/2018	73221	\$ 878.67
4800	0488337460101048	ECLIPSE MEDICAL IMAGING PC	6/15/2018	NF-3 Bill Form / HCFA 1500 Form	5/6/2018	73721	\$ 878.67
4801	0488337460101048	ECLIPSE MEDICAL IMAGING PC	6/15/2018	NF-3 Bill Form / HCFA 1500 Form	5/6/2018	73221	\$ 878.67
4802	0563937620101016	ECLIPSE MEDICAL IMAGING PC	6/15/2018	NF-3 Bill Form / HCFA 1500 Form	5/4/2018	73700	\$ 365.01
4803	0563937620101016	ECLIPSE MEDICAL IMAGING PC	6/15/2018	NF-3 Bill Form / HCFA 1500 Form	5/4/2018	72131	\$ 581.90
4804	0617189430101010	ECLIPSE MEDICAL IMAGING PC	6/15/2018	NF-3 Bill Form / HCFA 1500 Form	5/6/2018	73221	\$ 878.67
4805	0322755760101055	ECLIPSE MEDICAL IMAGING PC	6/15/2018	NF-3 Bill Form / HCFA 1500 Form	5/4/2018	72141	\$ 879.73
4806	0100801260101050	ECLIPSE MEDICAL IMAGING PC	6/15/2018	NF-3 Bill Form / HCFA 1500 Form	5/1/2018	73221	\$ 878.67
4807	0538399680101034	ECLIPSE MEDICAL IMAGING PC	6/18/2018	NF-3 Bill Form / HCFA 1500 Form	5/7/2018	73721	\$ 878.67
4808	0367959490101015	ECLIPSE MEDICAL IMAGING PC	6/18/2018	NF-3 Bill Form / HCFA 1500 Form	5/1/2018	73221	\$ 878.67
4809	0505227480101020	ECLIPSE MEDICAL IMAGING PC	6/18/2018	NF-3 Bill Form / HCFA 1500 Form	5/7/2018	73221	\$ 878.67
4810	0617189430101010	ECLIPSE MEDICAL IMAGING PC	6/18/2018	NF-3 Bill Form / HCFA 1500 Form	5/6/2018	70551	\$ 874.44
4811	0130825530101164	ECLIPSE MEDICAL IMAGING PC	6/19/2018	NF-3 Bill Form / HCFA 1500 Form	5/3/2018	72148	\$ 912.00
4812	0304052190101059	ECLIPSE MEDICAL IMAGING PC	6/19/2018	NF-3 Bill Form / HCFA 1500 Form	5/1/2018	73221	\$ 659.00
4813	0304052190101059	ECLIPSE MEDICAL IMAGING PC	6/19/2018	NF-3 Bill Form / HCFA 1500 Form	5/1/2018	72148	\$ 912.00
4814	0498056260101036	ECLIPSE MEDICAL IMAGING PC	6/20/2018	NF-3 Bill Form / HCFA 1500 Form	12/12/2017	72131	\$ 436.42
4815	0498056260101036	ECLIPSE MEDICAL IMAGING PC	6/20/2018	NF-3 Bill Form / HCFA 1500 Form	12/12/2017	72125	\$ 581.90
4816	0551888810101049	ECLIPSE MEDICAL IMAGING PC	6/21/2018	NF-3 Bill Form / HCFA 1500 Form	5/8/2018	73221	\$ 659.00
4817	0551888810101049	ECLIPSE MEDICAL IMAGING PC	6/21/2018	NF-3 Bill Form / HCFA 1500 Form	5/8/2018	73721	\$ 878.67
4818	0305309660101095	ECLIPSE MEDICAL IMAGING PC	6/21/2018	NF-3 Bill Form / HCFA 1500 Form	5/8/2018	73721	\$ 878.67
4819	0305309660101095	ECLIPSE MEDICAL IMAGING PC	6/21/2018	NF-3 Bill Form / HCFA 1500 Form	5/8/2018	73221	\$ 878.67
4820	0522957560101016	ECLIPSE MEDICAL IMAGING PC	6/21/2018	NF-3 Bill Form / HCFA 1500 Form	5/8/2018	73221	\$ 878.67
4821	0498056260101036	ECLIPSE MEDICAL IMAGING PC	6/22/2018	NF-3 Bill Form / HCFA 1500 Form	12/12/2017	72131	\$ 436.42
4822	0498056260101036	ECLIPSE MEDICAL IMAGING PC	6/22/2018	NF-3 Bill Form / HCFA 1500 Form	12/12/2017	72128	\$ 581.90
4823	0344092710101025	ECLIPSE MEDICAL IMAGING PC	6/25/2018	NF-3 Bill Form / HCFA 1500 Form	5/10/2018	72141	\$ 659.79
4824	0344092710101025	ECLIPSE MEDICAL IMAGING PC	6/25/2018	NF-3 Bill Form / HCFA 1500 Form	5/10/2018	72148	\$ 912.00
4825	0426663210101029	ECLIPSE MEDICAL IMAGING PC	6/25/2018	NF-3 Bill Form / HCFA 1500 Form	5/9/2018	73221	\$ 878.67
4826	0538399680101034	ECLIPSE MEDICAL IMAGING PC	6/25/2018	NF-3 Bill Form / HCFA 1500 Form	5/10/2018	72148	\$ 912.00
4827	0538399680101034	ECLIPSE MEDICAL IMAGING PC	6/25/2018	NF-3 Bill Form / HCFA 1500 Form	5/10/2018	72141	\$ 659.79
4828	0343928700101106	ECLIPSE MEDICAL IMAGING PC	6/25/2018	NF-3 Bill Form / HCFA 1500 Form	5/13/2018	72141	\$ 659.79
4829	0343928700101106	ECLIPSE MEDICAL IMAGING PC	6/25/2018	NF-3 Bill Form / HCFA 1500 Form	5/13/2018	72148	\$ 912.00
4830	0617189430101010	ECLIPSE MEDICAL IMAGING PC	6/25/2018	NF-3 Bill Form / HCFA 1500 Form	5/13/2018	72141	\$ 879.73

Government Employees Insurance Company, et al v. Eclipse Medical Imaging, et al
Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
4831	0287216210101156	ECLIPSE MEDICAL IMAGING PC	6/25/2018	NF-3 Bill Form / HCFA 1500 Form	5/10/2018	72148	\$ 912.00
4832	0617189430101010	ECLIPSE MEDICAL IMAGING PC	6/25/2018	NF-3 Bill Form / HCFA 1500 Form	5/13/2018	73721	\$ 878.67
4833	0305309660101095	ECLIPSE MEDICAL IMAGING PC	6/25/2018	NF-3 Bill Form / HCFA 1500 Form	5/11/2018	73221	\$ 878.67
4834	0100801260101050	ECLIPSE MEDICAL IMAGING PC	6/25/2018	NF-3 Bill Form / HCFA 1500 Form	5/9/2018	72148	\$ 912.00
4835	0100801260101050	ECLIPSE MEDICAL IMAGING PC	6/25/2018	NF-3 Bill Form / HCFA 1500 Form	5/9/2018	73221	\$ 659.00
4836	0305309660101095	ECLIPSE MEDICAL IMAGING PC	6/26/2018	NF-3 Bill Form / HCFA 1500 Form	5/11/2018	73221	\$ 878.67
4837	0016863800101142	ECLIPSE MEDICAL IMAGING PC	6/22/2018	NF-3 Bill Form / HCFA 1500 Form	12/13/2017	72141	\$ 879.73
4838	0016863800101142	ECLIPSE MEDICAL IMAGING PC	6/22/2018	NF-3 Bill Form / HCFA 1500 Form	12/15/2017	72148	\$ 912.00
4839	0492754990101096	ECLIPSE MEDICAL IMAGING PC	6/28/2018	NF-3 Bill Form / HCFA 1500 Form	5/14/2018	73221	\$ 878.67
4840	0100801260101050	ECLIPSE MEDICAL IMAGING PC	6/28/2018	NF-3 Bill Form / HCFA 1500 Form	5/14/2018	72141	\$ 879.73
4841	0589981740101043	ECLIPSE MEDICAL IMAGING PC	6/28/2018	NF-3 Bill Form / HCFA 1500 Form	5/14/2018	73721	\$ 878.67
4842	0623820500101017	ECLIPSE MEDICAL IMAGING PC	6/28/2018	NF-3 Bill Form / HCFA 1500 Form	5/15/2018	73221	\$ 659.00
4843	0623820500101017	ECLIPSE MEDICAL IMAGING PC	6/28/2018	NF-3 Bill Form / HCFA 1500 Form	5/15/2018	73221	\$ 878.67
4844	0600234340101046	ECLIPSE MEDICAL IMAGING PC	6/28/2018	NF-3 Bill Form / HCFA 1500 Form	5/16/2018	73221	\$ 878.67
4845	0600234340101046	ECLIPSE MEDICAL IMAGING PC	6/28/2018	NF-3 Bill Form / HCFA 1500 Form	5/16/2018	73221	\$ 878.67
4846	0492754990101096	ECLIPSE MEDICAL IMAGING PC	6/28/2018	NF-3 Bill Form / HCFA 1500 Form	5/15/2018	73221	\$ 878.67
4847	0304052190101059	ECLIPSE MEDICAL IMAGING PC	6/28/2018	NF-3 Bill Form / HCFA 1500 Form	5/14/2018	72141	\$ 879.73
4848	0589981740101043	ECLIPSE MEDICAL IMAGING PC	6/28/2018	NF-3 Bill Form / HCFA 1500 Form	5/14/2018	73221	\$ 878.67
4849	0305309660101095	ECLIPSE MEDICAL IMAGING PC	6/29/2018	NF-3 Bill Form / HCFA 1500 Form	5/18/2018	73221	\$ 878.67
4850	0409476100101145	ECLIPSE MEDICAL IMAGING PC	6/29/2018	NF-3 Bill Form / HCFA 1500 Form	5/18/2018	73721	\$ 878.67
4851	0551888810101049	ECLIPSE MEDICAL IMAGING PC	6/29/2018	NF-3 Bill Form / HCFA 1500 Form	5/14/2018	73221	\$ 878.67
4852	0551888810101049	ECLIPSE MEDICAL IMAGING PC	6/29/2018	NF-3 Bill Form / HCFA 1500 Form	5/14/2018	73700	\$ 365.01
4853	0403170020101071	ECLIPSE MEDICAL IMAGING PC	6/29/2018	NF-3 Bill Form / HCFA 1500 Form	5/18/2018	72131	\$ 581.90
4854	0228136100101052	ECLIPSE MEDICAL IMAGING PC	6/29/2018	NF-3 Bill Form / HCFA 1500 Form	5/15/2018	73218	\$ 765.99
4855	0228136100101052	ECLIPSE MEDICAL IMAGING PC	6/29/2018	NF-3 Bill Form / HCFA 1500 Form	5/15/2018	73221	\$ 878.67
4856	0455471150101064	ECLIPSE MEDICAL IMAGING PC	6/29/2018	NF-3 Bill Form / HCFA 1500 Form	5/18/2018	72146	\$ 959.61
4857	0474237290101125	ECLIPSE MEDICAL IMAGING PC	6/29/2018	NF-3 Bill Form / HCFA 1500 Form	5/18/2018	73221	\$ 878.67
4858	0600234340101046	ECLIPSE MEDICAL IMAGING PC	7/2/2018	NF-3 Bill Form / HCFA 1500 Form	5/20/2018	73218	\$ 765.99
4859	0422598040101092	ECLIPSE MEDICAL IMAGING PC	7/2/2018	NF-3 Bill Form / HCFA 1500 Form	5/17/2018	73721	\$ 878.67
4860	0590678200101011	ECLIPSE MEDICAL IMAGING PC	7/2/2018	NF-3 Bill Form / HCFA 1500 Form	5/21/2018	72141	\$ 879.73
4861	0475338840101034	ECLIPSE MEDICAL IMAGING PC	7/2/2018	NF-3 Bill Form / HCFA 1500 Form	5/17/2018	73721	\$ 878.67
4862	0538399680101034	ECLIPSE MEDICAL IMAGING PC	7/2/2018	NF-3 Bill Form / HCFA 1500 Form	5/17/2018	73221	\$ 878.67
4863	0344092710101025	ECLIPSE MEDICAL IMAGING PC	7/2/2018	NF-3 Bill Form / HCFA 1500 Form	5/17/2018	73721	\$ 659.00
4864	0344092710101025	ECLIPSE MEDICAL IMAGING PC	7/2/2018	NF-3 Bill Form / HCFA 1500 Form	5/17/2018	72146	\$ 959.61
4865	0284256310101048	ECLIPSE MEDICAL IMAGING PC	7/2/2018	NF-3 Bill Form / HCFA 1500 Form	5/21/2018	72141	\$ 879.73
4866	0566949490101072	ECLIPSE MEDICAL IMAGING PC	7/2/2018	NF-3 Bill Form / HCFA 1500 Form	5/13/2018	72146	\$ 959.61
4867	0617189430101010	ECLIPSE MEDICAL IMAGING PC	7/2/2018	NF-3 Bill Form / HCFA 1500 Form	5/20/2018	73721	\$ 878.67
4868	0305309660101095	ECLIPSE MEDICAL IMAGING PC	7/2/2018	NF-3 Bill Form / HCFA 1500 Form	5/21/2018	73721	\$ 878.67
4869	0617189430101010	ECLIPSE MEDICAL IMAGING PC	7/2/2018	NF-3 Bill Form / HCFA 1500 Form	5/20/2018	72148	\$ 912.00
4870	0177927690101044	ECLIPSE MEDICAL IMAGING PC	7/2/2018	NF-3 Bill Form / HCFA 1500 Form	5/21/2018	73221	\$ 878.67
4871	060344370101018	ECLIPSE MEDICAL IMAGING PC	7/2/2018	NF-3 Bill Form / HCFA 1500 Form	5/18/2018	73221	\$ 878.67
4872	0623820500101017	ECLIPSE MEDICAL IMAGING PC	7/2/2018	NF-3 Bill Form / HCFA 1500 Form	5/20/2018	73721	\$ 878.67
4873	0576364260101013	ECLIPSE MEDICAL IMAGING PC	7/2/2018	NF-3 Bill Form / HCFA 1500 Form	11/24/2017	72141	\$ 659.79
4874	0576364260101013	ECLIPSE MEDICAL IMAGING PC	7/2/2018	NF-3 Bill Form / HCFA 1500 Form	11/24/2017	72148	\$ 912.00
4875	0321471420101102	ECLIPSE MEDICAL IMAGING PC	7/2/2018	NF-3 Bill Form / HCFA 1500 Form	5/20/2018	72148	\$ 912.00
4876	0321471420101102	ECLIPSE MEDICAL IMAGING PC	7/2/2018	NF-3 Bill Form / HCFA 1500 Form	5/20/2018	72141	\$ 659.79
4877	0589981740101043	ECLIPSE MEDICAL IMAGING PC	7/5/2018	NF-3 Bill Form / HCFA 1500 Form	5/21/2018	72148	\$ 912.00
4878	0589981740101043	ECLIPSE MEDICAL IMAGING PC	7/5/2018	NF-3 Bill Form / HCFA 1500 Form	5/21/2018	73221	\$ 659.00
4879	0176009610101122	ECLIPSE MEDICAL IMAGING PC	7/6/2018	NF-3 Bill Form / HCFA 1500 Form	5/24/2018	73721	\$ 878.67
4880	0305309660101095	ECLIPSE MEDICAL IMAGING PC	7/6/2018	NF-3 Bill Form / HCFA 1500 Form	5/23/2018	73721	\$ 878.67
4881	0568245680101032	ECLIPSE MEDICAL IMAGING PC	7/6/2018	NF-3 Bill Form / HCFA 1500 Form	5/24/2018	73221	\$ 878.67
4882	0543778940101038	ECLIPSE MEDICAL IMAGING PC	7/6/2018	NF-3 Bill Form / HCFA 1500 Form	5/22/2018	73218	\$ 574.49
4883	0543778940101038	ECLIPSE MEDICAL IMAGING PC	7/6/2018	NF-3 Bill Form / HCFA 1500 Form	5/22/2018	72141	\$ 879.73
4884	0301454220101021	ECLIPSE MEDICAL IMAGING PC	7/6/2018	NF-3 Bill Form / HCFA 1500 Form	5/23/2018	70551	\$ 874.44
4885	0506206910101023	ECLIPSE MEDICAL IMAGING PC	5/11/2018	NF-3 Bill Form / HCFA 1500 Form	12/12/2017	72131	\$ 436.42
4886	0506206910101023	ECLIPSE MEDICAL IMAGING PC	5/11/2018	NF-3 Bill Form / HCFA 1500 Form	12/12/2017	72126	\$ 581.90
4887	0600234340101046	ECLIPSE MEDICAL IMAGING PC	7/6/2018	NF-3 Bill Form / HCFA 1500 Form	5/22/2018	73221	\$ 659.00
4888	0600234340101046	ECLIPSE MEDICAL IMAGING PC	7/6/2018	NF-3 Bill Form / HCFA 1500 Form	5/22/2018	73718	\$ 901.42
4889	0434369300101131	ECLIPSE MEDICAL IMAGING PC	7/6/2018	NF-3 Bill Form / HCFA 1500 Form	5/24/2018	73721	\$ 878.67
4890	0579412640101034	ECLIPSE MEDICAL IMAGING PC	7/6/2018	NF-3 Bill Form / HCFA 1500 Form	5/22/2018	73721	\$ 878.67
4891	0589981740101043	ECLIPSE MEDICAL IMAGING PC	7/6/2018	NF-3 Bill Form / HCFA 1500 Form	5/22/2018	73221	\$ 659.00
4892	0589981740101043	ECLIPSE MEDICAL IMAGING PC	7/6/2018	NF-3 Bill Form / HCFA 1500 Form	5/22/2018	72148	\$ 912.00
4893	0628968360101018	ECLIPSE MEDICAL IMAGING PC	7/9/2018	NF-3 Bill Form / HCFA 1500 Form	5/28/2018	73221	\$ 878.67
4894	0628968360101018	ECLIPSE MEDICAL IMAGING PC	7/9/2018	NF-3 Bill Form / HCFA 1500 Form	5/28/2018	70551	\$ 655.83
4895	0543778940101038	ECLIPSE MEDICAL IMAGING PC	7/9/2018	NF-3 Bill Form / HCFA 1500 Form	5/25/2018	73221	\$ 659.00
4896	0543778940101038	ECLIPSE MEDICAL IMAGING PC	7/9/2018	NF-3 Bill Form / HCFA 1500 Form	5/25/2018	72148	\$ 912.00
4897	0131966650101201	ECLIPSE MEDICAL IMAGING PC	7/9/2018	NF-3 Bill Form / HCFA 1500 Form	5/22/2018	72141	\$ 879.73
4898	0301454220101021	ECLIPSE MEDICAL IMAGING PC	7/9/2018	NF-3 Bill Form / HCFA 1500 Form	5/27/2018	72141	\$ 879.73
4899	0617189430101010	ECLIPSE MEDICAL IMAGING PC	7/9/2018	NF-3 Bill Form / HCFA 1500 Form	5/27/2018	72148	\$ 912.00
4900	0595934380101015	ECLIPSE MEDICAL IMAGING PC	7/9/2018	NF-3 Bill Form / HCFA 1500 Form	5/24/2018	73718	\$ 901.42

Government Employees Insurance Company, et al v. Eclipse Medical Imaging, et al
Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
4901	0568245680101032	ECLIPSE MEDICAL IMAGING PC	7/10/2018	NF-3 Bill Form / HCFA 1500 Form	5/27/2018	73221	\$ 878.67
4902	0344546940101048	ECLIPSE MEDICAL IMAGING PC	7/12/2018	NF-3 Bill Form / HCFA 1500 Form	5/30/2018	72141	\$ 879.73
4903	0305342920101084	ECLIPSE MEDICAL IMAGING PC	7/16/2018	NF-3 Bill Form / HCFA 1500 Form	6/1/2018	73200	\$ 365.01
4904	0305342920101084	ECLIPSE MEDICAL IMAGING PC	7/16/2018	NF-3 Bill Form / HCFA 1500 Form	6/1/2018	73721	\$ 878.67
4905	0612367730101014	ECLIPSE MEDICAL IMAGING PC	7/16/2018	NF-3 Bill Form / HCFA 1500 Form	5/31/2018	72141	\$ 659.79
4906	0612367730101014	ECLIPSE MEDICAL IMAGING PC	7/16/2018	NF-3 Bill Form / HCFA 1500 Form	5/31/2018	72148	\$ 912.00
4907	0628968360101018	ECLIPSE MEDICAL IMAGING PC	7/16/2018	NF-3 Bill Form / HCFA 1500 Form	6/6/2018	73221	\$ 878.67
4908	0551888810101049	ECLIPSE MEDICAL IMAGING PC	7/16/2018	NF-3 Bill Form / HCFA 1500 Form	5/31/2018	72141	\$ 879.73
4909	0344546940101048	ECLIPSE MEDICAL IMAGING PC	7/16/2018	NF-3 Bill Form / HCFA 1500 Form	5/31/2018	73721	\$ 878.67
4910	0290163990101029	ECLIPSE MEDICAL IMAGING PC	7/16/2018	NF-3 Bill Form / HCFA 1500 Form	6/6/2018	72146	\$ 959.61
4911	0289413940101113	ECLIPSE MEDICAL IMAGING PC	7/17/2018	NF-3 Bill Form / HCFA 1500 Form	6/6/2018	73221	\$ 878.67
4912	0392647780101030	ECLIPSE MEDICAL IMAGING PC	7/16/2018	NF-3 Bill Form / HCFA 1500 Form	6/1/2018	72141	\$ 659.79
4913	0392647780101030	ECLIPSE MEDICAL IMAGING PC	7/16/2018	NF-3 Bill Form / HCFA 1500 Form	6/1/2018	72148	\$ 912.00
4914	0604985510101019	ECLIPSE MEDICAL IMAGING PC	7/16/2018	NF-3 Bill Form / HCFA 1500 Form	5/31/2018	72148	\$ 912.00
4915	0551888810101049	ECLIPSE MEDICAL IMAGING PC	7/17/2018	NF-3 Bill Form / HCFA 1500 Form	6/3/2018	72148	\$ 912.00
4916	0601202160101015	ECLIPSE MEDICAL IMAGING PC	7/17/2018	NF-3 Bill Form / HCFA 1500 Form	6/4/2018	73721	\$ 878.67
4917	0479305730101057	ECLIPSE MEDICAL IMAGING PC	7/17/2018	NF-3 Bill Form / HCFA 1500 Form	6/1/2018	73721	\$ 878.67
4918	0516274990101014	ECLIPSE MEDICAL IMAGING PC	7/20/2018	NF-3 Bill Form / HCFA 1500 Form	6/10/2018	72148	\$ 912.00
4919	0516274990101014	ECLIPSE MEDICAL IMAGING PC	7/20/2018	NF-3 Bill Form / HCFA 1500 Form	6/10/2018	72141	\$ 879.73
4920	0488337460101048	ECLIPSE MEDICAL IMAGING PC	7/20/2018	NF-3 Bill Form / HCFA 1500 Form	6/7/2018	73721	\$ 878.67
4921	0274111780101071	ECLIPSE MEDICAL IMAGING PC	7/20/2018	NF-3 Bill Form / HCFA 1500 Form	6/8/2018	73221	\$ 878.67
4922	0177927690101044	ECLIPSE MEDICAL IMAGING PC	7/20/2018	NF-3 Bill Form / HCFA 1500 Form	6/7/2018	72141	\$ 659.79
4923	0177927690101044	ECLIPSE MEDICAL IMAGING PC	7/20/2018	NF-3 Bill Form / HCFA 1500 Form	6/7/2018	72148	\$ 912.00
4924	0600234340101046	ECLIPSE MEDICAL IMAGING PC	7/20/2018	NF-3 Bill Form / HCFA 1500 Form	6/10/2018	73221	\$ 878.67
4925	0600234340101046	ECLIPSE MEDICAL IMAGING PC	7/20/2018	NF-3 Bill Form / HCFA 1500 Form	6/10/2018	72148	\$ 912.00
4926	0568245680101032	ECLIPSE MEDICAL IMAGING PC	7/20/2018	NF-3 Bill Form / HCFA 1500 Form	6/7/2018	72148	\$ 912.00
4927	0568245680101032	ECLIPSE MEDICAL IMAGING PC	7/20/2018	NF-3 Bill Form / HCFA 1500 Form	6/7/2018	72141	\$ 659.79
4928	0176009610101122	ECLIPSE MEDICAL IMAGING PC	7/23/2018	NF-3 Bill Form / HCFA 1500 Form	6/11/2018	73221	\$ 878.67
4929	0589981740101043	ECLIPSE MEDICAL IMAGING PC	7/23/2018	NF-3 Bill Form / HCFA 1500 Form	6/12/2018	72141	\$ 879.73
4930	0582746330101027	ECLIPSE MEDICAL IMAGING PC	7/23/2018	NF-3 Bill Form / HCFA 1500 Form	6/11/2018	73221	\$ 659.00
4931	0582746330101027	ECLIPSE MEDICAL IMAGING PC	7/23/2018	NF-3 Bill Form / HCFA 1500 Form	6/11/2018	73721	\$ 878.67
4932	0624257070101011	ECLIPSE MEDICAL IMAGING PC	7/23/2018	NF-3 Bill Form / HCFA 1500 Form	6/12/2018	73221	\$ 878.67
4933	0554486750101116	ECLIPSE MEDICAL IMAGING PC	7/26/2018	NF-3 Bill Form / HCFA 1500 Form	6/14/2018	73721	\$ 659.00
4934	0554486750101116	ECLIPSE MEDICAL IMAGING PC	7/26/2018	NF-3 Bill Form / HCFA 1500 Form	6/14/2018	73221	\$ 878.67
4935	0617400600101015	ECLIPSE MEDICAL IMAGING PC	7/26/2018	NF-3 Bill Form / HCFA 1500 Form	6/14/2018	72141	\$ 659.79
4936	0617400600101015	ECLIPSE MEDICAL IMAGING PC	7/26/2018	NF-3 Bill Form / HCFA 1500 Form	6/14/2018	72148	\$ 912.00
4937	0629570310101012	ECLIPSE MEDICAL IMAGING PC	7/26/2018	NF-3 Bill Form / HCFA 1500 Form	6/14/2018	73721	\$ 878.67
4938	0415622620101063	ECLIPSE MEDICAL IMAGING PC	7/27/2018	NF-3 Bill Form / HCFA 1500 Form	6/17/2018	73221	\$ 878.67
4939	0583397550101021	ECLIPSE MEDICAL IMAGING PC	7/27/2018	NF-3 Bill Form / HCFA 1500 Form	6/15/2018	72148	\$ 912.00
4940	0583397550101021	ECLIPSE MEDICAL IMAGING PC	7/27/2018	NF-3 Bill Form / HCFA 1500 Form	6/15/2018	73721	\$ 878.67
4941	0415622620101063	ECLIPSE MEDICAL IMAGING PC	7/27/2018	NF-3 Bill Form / HCFA 1500 Form	6/17/2018	73721	\$ 878.67
4942	0584325750101011	ECLIPSE MEDICAL IMAGING PC	7/27/2018	NF-3 Bill Form / HCFA 1500 Form	6/15/2018	72148	\$ 912.00
4943	0600234340101046	ECLIPSE MEDICAL IMAGING PC	7/27/2018	NF-3 Bill Form / HCFA 1500 Form	6/17/2018	73718	\$ 901.42
4944	0600234340101046	ECLIPSE MEDICAL IMAGING PC	7/27/2018	NF-3 Bill Form / HCFA 1500 Form	6/17/2018	72141	\$ 879.73
4945	0628968360101018	ECLIPSE MEDICAL IMAGING PC	7/27/2018	NF-3 Bill Form / HCFA 1500 Form	6/15/2018	72148	\$ 912.00
4946	0628968360101018	ECLIPSE MEDICAL IMAGING PC	7/27/2018	NF-3 Bill Form / HCFA 1500 Form	6/15/2018	72141	\$ 659.79
4947	0306523460101076	ECLIPSE MEDICAL IMAGING PC	7/30/2018	NF-3 Bill Form / HCFA 1500 Form	6/18/2018	73200	\$ 486.68
4948	0160271260101038	ECLIPSE MEDICAL IMAGING PC	7/30/2018	NF-3 Bill Form / HCFA 1500 Form	6/18/2018	72148	\$ 912.00
4949	0160271260101038	ECLIPSE MEDICAL IMAGING PC	7/30/2018	NF-3 Bill Form / HCFA 1500 Form	6/18/2018	72141	\$ 659.79
4950	0347310840101070	ECLIPSE MEDICAL IMAGING PC	7/30/2018	NF-3 Bill Form / HCFA 1500 Form	6/18/2018	71020	\$ 58.72
4951	0347310840101070	ECLIPSE MEDICAL IMAGING PC	7/30/2018	NF-3 Bill Form / HCFA 1500 Form	6/18/2018	72148	\$ 912.00
4952	0347310840101070	ECLIPSE MEDICAL IMAGING PC	7/30/2018	NF-3 Bill Form / HCFA 1500 Form	6/18/2018	71120	\$ 58.71
4953	0347310840101070	ECLIPSE MEDICAL IMAGING PC	7/30/2018	NF-3 Bill Form / HCFA 1500 Form	6/18/2018	71110	\$ 80.94
4954	0306523460101076	ECLIPSE MEDICAL IMAGING PC	7/30/2018	NF-3 Bill Form / HCFA 1500 Form	6/18/2018	73221	\$ 878.67
4955	0595934380101015	ECLIPSE MEDICAL IMAGING PC	8/3/2018	NF-3 Bill Form / HCFA 1500 Form	6/19/2018	73721	\$ 878.67
4956	0451011880101028	ECLIPSE MEDICAL IMAGING PC	8/3/2018	NF-3 Bill Form / HCFA 1500 Form	6/19/2018	73221	\$ 878.67
4957	0451011880101028	ECLIPSE MEDICAL IMAGING PC	8/3/2018	NF-3 Bill Form / HCFA 1500 Form	6/19/2018	71120	\$ 58.71
4958	0451011880101028	ECLIPSE MEDICAL IMAGING PC	8/3/2018	NF-3 Bill Form / HCFA 1500 Form	6/19/2018	72100	\$ 65.86
4959	0284256310101048	ECLIPSE MEDICAL IMAGING PC	8/3/2018	NF-3 Bill Form / HCFA 1500 Form	6/19/2018	72148	\$ 912.00
4960	0284256310101048	ECLIPSE MEDICAL IMAGING PC	8/3/2018	NF-3 Bill Form / HCFA 1500 Form	6/19/2018	72141	\$ 659.79
4961	0426722650101038	ECLIPSE MEDICAL IMAGING PC	8/6/2018	NF-3 Bill Form / HCFA 1500 Form	6/21/2018	73718	\$ 901.42
4962	0278193630101101	ECLIPSE MEDICAL IMAGING PC	8/6/2018	NF-3 Bill Form / HCFA 1500 Form	6/20/2018	72141	\$ 659.79
4963	0278193630101101	ECLIPSE MEDICAL IMAGING PC	8/6/2018	NF-3 Bill Form / HCFA 1500 Form	6/20/2018	72148	\$ 912.00
4964	0600234340101046	ECLIPSE MEDICAL IMAGING PC	8/6/2018	NF-3 Bill Form / HCFA 1500 Form	6/24/2018	72146	\$ 959.61
4965	0274111780101071	ECLIPSE MEDICAL IMAGING PC	8/6/2018	NF-3 Bill Form / HCFA 1500 Form	6/25/2018	72148	\$ 912.00
4966	0274111780101071	ECLIPSE MEDICAL IMAGING PC	8/6/2018	NF-3 Bill Form / HCFA 1500 Form	6/25/2018	72141	\$ 659.79
4967	0563748430101017	ECLIPSE MEDICAL IMAGING PC	8/6/2018	NF-3 Bill Form / HCFA 1500 Form	6/26/2018	73221	\$ 878.67
4968	0289413940101113	ECLIPSE MEDICAL IMAGING PC	8/6/2018	NF-3 Bill Form / HCFA 1500 Form	6/26/2018	72148	\$ 912.00
4969	0289413940101113	ECLIPSE MEDICAL IMAGING PC	8/6/2018	NF-3 Bill Form / HCFA 1500 Form	6/26/2018	72141	\$ 659.79
4970	0183749990101025	ECLIPSE MEDICAL IMAGING PC	8/6/2018	NF-3 Bill Form / HCFA 1500 Form	6/22/2018	73030	\$ 94.69

Government Employees Insurance Company, et al v. Eclipse Medical Imaging, et al
Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
4971	0183749990101025	ECLIPSE MEDICAL IMAGING PC	8/6/2018	NF-3 Bill Form / HCFA 1500 Form	6/22/2018	72100	\$ 65.86
4972	0154056010101034	ECLIPSE MEDICAL IMAGING PC	8/6/2018	NF-3 Bill Form / HCFA 1500 Form	6/27/2018	72131	\$ 581.90
4973	0600234340101046	ECLIPSE MEDICAL IMAGING PC	8/7/2018	NF-3 Bill Form / HCFA 1500 Form	6/24/2018	72141	\$ 879.73
4974	0426722650101038	ECLIPSE MEDICAL IMAGING PC	8/10/2018	NF-3 Bill Form / HCFA 1500 Form	6/28/2018	72148	\$ 912.00
4975	0306523460101076	ECLIPSE MEDICAL IMAGING PC	8/10/2018	NF-3 Bill Form / HCFA 1500 Form	6/29/2018	73221	\$ 878.67
4976	0589672620101027	ECLIPSE MEDICAL IMAGING PC	8/10/2018	NF-3 Bill Form / HCFA 1500 Form	6/28/2018	73721	\$ 878.67
4977	0434369300101131	ECLIPSE MEDICAL IMAGING PC	8/10/2018	NF-3 Bill Form / HCFA 1500 Form	6/29/2018	72141	\$ 879.73
4978	0434369300101131	ECLIPSE MEDICAL IMAGING PC	8/10/2018	NF-3 Bill Form / HCFA 1500 Form	6/29/2018	73721	\$ 659.00
4979	0535179680101017	ECLIPSE MEDICAL IMAGING PC	8/10/2018	NF-3 Bill Form / HCFA 1500 Form	7/1/2018	73221	\$ 878.67
4980	0629570310101012	ECLIPSE MEDICAL IMAGING PC	8/10/2018	NF-3 Bill Form / HCFA 1500 Form	7/1/2018	72141	\$ 659.79
4981	0629570310101012	ECLIPSE MEDICAL IMAGING PC	8/10/2018	NF-3 Bill Form / HCFA 1500 Form	7/1/2018	72148	\$ 912.00
4982	0300407930101021	ECLIPSE MEDICAL IMAGING PC	8/10/2018	NF-3 Bill Form / HCFA 1500 Form	7/1/2018	73721	\$ 878.67
4983	0300407930101021	ECLIPSE MEDICAL IMAGING PC	8/10/2018	NF-3 Bill Form / HCFA 1500 Form	7/1/2018	73221	\$ 659.00
4984	0535179680101017	ECLIPSE MEDICAL IMAGING PC	8/10/2018	NF-3 Bill Form / HCFA 1500 Form	7/1/2018	73221	\$ 878.67
4985	0306523460101076	ECLIPSE MEDICAL IMAGING PC	8/13/2018	NF-3 Bill Form / HCFA 1500 Form	6/29/2018	73700	\$ 486.68
4986	0552961600101013	ECLIPSE MEDICAL IMAGING PC	8/13/2018	NF-3 Bill Form / HCFA 1500 Form	7/2/2018	73721	\$ 878.67
4987	0552961600101013	ECLIPSE MEDICAL IMAGING PC	8/13/2018	NF-3 Bill Form / HCFA 1500 Form	7/2/2018	73721	\$ 878.67
4988	0402178090101013	ECLIPSE MEDICAL IMAGING PC	8/13/2018	NF-3 Bill Form / HCFA 1500 Form	7/2/2018	73721	\$ 878.67
4989	0554486750101116	ECLIPSE MEDICAL IMAGING PC	8/13/2018	NF-3 Bill Form / HCFA 1500 Form	7/2/2018	72148	\$ 912.00
4990	0554486750101116	ECLIPSE MEDICAL IMAGING PC	8/13/2018	NF-3 Bill Form / HCFA 1500 Form	7/2/2018	72141	\$ 659.79
4991	0451011880101028	ECLIPSE MEDICAL IMAGING PC	8/13/2018	NF-3 Bill Form / HCFA 1500 Form	7/2/2018	71250	\$ 518.42
4992	0451011880101028	ECLIPSE MEDICAL IMAGING PC	8/13/2018	NF-3 Bill Form / HCFA 1500 Form	7/2/2018	73070	\$ 52.77
4993	0409476100101145	ECLIPSE MEDICAL IMAGING PC	8/13/2018	NF-3 Bill Form / HCFA 1500 Form	7/2/2018	72148	\$ 912.00
4994	0409476100101145	ECLIPSE MEDICAL IMAGING PC	8/13/2018	NF-3 Bill Form / HCFA 1500 Form	7/2/2018	72141	\$ 659.79
4995	0549084240101024	ECLIPSE MEDICAL IMAGING PC	8/14/2018	NF-3 Bill Form / HCFA 1500 Form	7/1/2018	73721	\$ 878.67
4996	0398508720101072	ECLIPSE MEDICAL IMAGING PC	8/17/2018	NF-3 Bill Form / HCFA 1500 Form	7/6/2018	73100	\$ 46.42
4997	0398508720101072	ECLIPSE MEDICAL IMAGING PC	8/17/2018	NF-3 Bill Form / HCFA 1500 Form	7/6/2018	73560	\$ 55.54
4998	0398508720101072	ECLIPSE MEDICAL IMAGING PC	8/17/2018	NF-3 Bill Form / HCFA 1500 Form	7/6/2018	73120	\$ 47.61
4999	0398508720101072	ECLIPSE MEDICAL IMAGING PC	8/17/2018	NF-3 Bill Form / HCFA 1500 Form	7/6/2018	72100	\$ 87.81
5000	0535179680101017	ECLIPSE MEDICAL IMAGING PC	8/17/2018	NF-3 Bill Form / HCFA 1500 Form	7/5/2018	73221	\$ 878.67
5001	0517061190101012	ECLIPSE MEDICAL IMAGING PC	8/17/2018	NF-3 Bill Form / HCFA 1500 Form	7/5/2018	70551	\$ 874.44
5002	0306523460101076	ECLIPSE MEDICAL IMAGING PC	8/17/2018	NF-3 Bill Form / HCFA 1500 Form	7/6/2018	72141	\$ 879.73
5003	0306523460101076	ECLIPSE MEDICAL IMAGING PC	8/17/2018	NF-3 Bill Form / HCFA 1500 Form	7/8/2018	72148	\$ 912.00
5004	0306523460101076	ECLIPSE MEDICAL IMAGING PC	8/17/2018	NF-3 Bill Form / HCFA 1500 Form	7/8/2018	72141	\$ 659.79
5005	03843211330101052	ECLIPSE MEDICAL IMAGING PC	8/17/2018	NF-3 Bill Form / HCFA 1500 Form	7/6/2018	72195	\$ 899.83
5006	0535179680101017	ECLIPSE MEDICAL IMAGING PC	8/17/2018	NF-3 Bill Form / HCFA 1500 Form	7/5/2018	73221	\$ 878.67
5007	0542063240101025	ECLIPSE MEDICAL IMAGING PC	8/17/2018	NF-3 Bill Form / HCFA 1500 Form	7/5/2018	73721	\$ 878.67
5008	0600234340101046	ECLIPSE MEDICAL IMAGING PC	8/17/2018	NF-3 Bill Form / HCFA 1500 Form	7/8/2018	72146	\$ 959.61
5009	0306523460101076	ECLIPSE MEDICAL IMAGING PC	8/17/2018	NF-3 Bill Form / HCFA 1500 Form	7/6/2018	72131	\$ 581.90
5010	0610536790101039	ECLIPSE MEDICAL IMAGING PC	8/20/2018	NF-3 Bill Form / HCFA 1500 Form	7/9/2018	73721	\$ 878.67
5011	0462824810101059	ECLIPSE MEDICAL IMAGING PC	8/20/2018	NF-3 Bill Form / HCFA 1500 Form	7/10/2018	73620	\$ 56.73
5012	0462824810101059	ECLIPSE MEDICAL IMAGING PC	8/20/2018	NF-3 Bill Form / HCFA 1500 Form	7/10/2018	73600	\$ 54.75
5013	0462824810101059	ECLIPSE MEDICAL IMAGING PC	8/20/2018	NF-3 Bill Form / HCFA 1500 Form	7/10/2018	73721	\$ 878.67
5014	0462824810101059	ECLIPSE MEDICAL IMAGING PC	8/20/2018	NF-3 Bill Form / HCFA 1500 Form	7/10/2018	73560	\$ 55.54
5015	0451011880101028	ECLIPSE MEDICAL IMAGING PC	8/20/2018	NF-3 Bill Form / HCFA 1500 Form	7/10/2018	73221	\$ 659.00
5016	0451011880101028	ECLIPSE MEDICAL IMAGING PC	8/20/2018	NF-3 Bill Form / HCFA 1500 Form	7/10/2018	72141	\$ 879.73
5017	0600234340101046	ECLIPSE MEDICAL IMAGING PC	8/21/2018	NF-3 Bill Form / HCFA 1500 Form	7/8/2018	72148	\$ 912.00
5018	0536342420101023	ECLIPSE MEDICAL IMAGING PC	8/21/2018	NF-3 Bill Form / HCFA 1500 Form	7/10/2018	73721	\$ 878.67
5019	0402178090101013	ECLIPSE MEDICAL IMAGING PC	8/21/2018	NF-3 Bill Form / HCFA 1500 Form	7/10/2018	72148	\$ 912.00
5020	0278193630101101	ECLIPSE MEDICAL IMAGING PC	8/22/2018	NF-3 Bill Form / HCFA 1500 Form	7/10/2018	73221	\$ 878.67
5021	0317794420101079	ECLIPSE MEDICAL IMAGING PC	8/24/2018	NF-3 Bill Form / HCFA 1500 Form	7/11/2018	72148	\$ 912.00
5022	0462824810101059	ECLIPSE MEDICAL IMAGING PC	8/24/2018	NF-3 Bill Form / HCFA 1500 Form	7/12/2018	72148	\$ 912.00
5023	0462824810101059	ECLIPSE MEDICAL IMAGING PC	8/24/2018	NF-3 Bill Form / HCFA 1500 Form	7/12/2018	72100	\$ 65.86
5024	0462824810101059	ECLIPSE MEDICAL IMAGING PC	8/24/2018	NF-3 Bill Form / HCFA 1500 Form	7/12/2018	73030	\$ 71.02
5025	0462824810101059	ECLIPSE MEDICAL IMAGING PC	8/24/2018	NF-3 Bill Form / HCFA 1500 Form	7/12/2018	73560	\$ 55.54
5026	0462824810101059	ECLIPSE MEDICAL IMAGING PC	8/24/2018	NF-3 Bill Form / HCFA 1500 Form	7/12/2018	73721	\$ 659.00
5027	0301019750101046	ECLIPSE MEDICAL IMAGING PC	8/24/2018	NF-3 Bill Form / HCFA 1500 Form	7/13/2018	72141	\$ 659.79
5028	0301019750101046	ECLIPSE MEDICAL IMAGING PC	8/24/2018	NF-3 Bill Form / HCFA 1500 Form	7/13/2018	72148	\$ 912.00
5029	0305342920101084	ECLIPSE MEDICAL IMAGING PC	8/24/2018	NF-3 Bill Form / HCFA 1500 Form	7/11/2018	72125	\$ 436.42
5030	0305342920101084	ECLIPSE MEDICAL IMAGING PC	8/24/2018	NF-3 Bill Form / HCFA 1500 Form	7/11/2018	72131	\$ 581.90
5031	0546013400101022	ECLIPSE MEDICAL IMAGING PC	8/24/2018	NF-3 Bill Form / HCFA 1500 Form	7/11/2018	72148	\$ 912.00
5032	0546013400101022	ECLIPSE MEDICAL IMAGING PC	8/24/2018	NF-3 Bill Form / HCFA 1500 Form	7/11/2018	72141	\$ 659.79
5033	0398508720101072	ECLIPSE MEDICAL IMAGING PC	8/24/2018	NF-3 Bill Form / HCFA 1500 Form	7/12/2018	73721	\$ 878.67
5034	0398508720101072	ECLIPSE MEDICAL IMAGING PC	8/24/2018	NF-3 Bill Form / HCFA 1500 Form	7/12/2018	73560	\$ 55.54
5035	0306671790101033	ECLIPSE MEDICAL IMAGING PC	8/24/2018	NF-3 Bill Form / HCFA 1500 Form	7/12/2018	72148	\$ 912.00
5036	0306523460101076	ECLIPSE MEDICAL IMAGING PC	8/27/2018	NF-3 Bill Form / HCFA 1500 Form	7/20/2018	72125	\$ 581.90
5037	0306523460101076	ECLIPSE MEDICAL IMAGING PC	8/27/2018	NF-3 Bill Form / HCFA 1500 Form	7/20/2018	72148	\$ 912.00
5038	0415622620101063	ECLIPSE MEDICAL IMAGING PC	8/27/2018	NF-3 Bill Form / HCFA 1500 Form	7/15/2018	72141	\$ 879.73
5039	0566812100101025	ECLIPSE MEDICAL IMAGING PC	8/27/2018	NF-3 Bill Form / HCFA 1500 Form	7/22/2018	73221	\$ 878.67
5040	0301019750101046	ECLIPSE MEDICAL IMAGING PC	8/27/2018	NF-3 Bill Form / HCFA 1500 Form	7/16/2018	72148	\$ 912.00

Government Employees Insurance Company, et al v. Eclipse Medical Imaging, et al
Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
5041	0301019750101046	ECLIPSE MEDICAL IMAGING PC	8/27/2018	NF-3 Bill Form / HCFA 1500 Form	7/16/2018	73221	\$ 659.00
5042	0306671790101033	ECLIPSE MEDICAL IMAGING PC	8/27/2018	NF-3 Bill Form / HCFA 1500 Form	7/12/2018	72141	\$ 879.73
5043	0028861600101458	ECLIPSE MEDICAL IMAGING PC	8/27/2018	NF-3 Bill Form / HCFA 1500 Form	7/18/2018	73590	\$ 60.70
5044	0028861600101458	ECLIPSE MEDICAL IMAGING PC	8/27/2018	NF-3 Bill Form / HCFA 1500 Form	7/18/2018	73221	\$ 878.67
5045	0028861600101458	ECLIPSE MEDICAL IMAGING PC	8/27/2018	NF-3 Bill Form / HCFA 1500 Form	7/18/2018	73610	\$ 58.72
5046	0028861600101458	ECLIPSE MEDICAL IMAGING PC	8/27/2018	NF-3 Bill Form / HCFA 1500 Form	7/18/2018	73650	\$ 50.78
5047	0451011880101028	ECLIPSE MEDICAL IMAGING PC	8/27/2018	NF-3 Bill Form / HCFA 1500 Form	7/16/2018	73221	\$ 659.00
5048	0451011880101028	ECLIPSE MEDICAL IMAGING PC	8/27/2018	NF-3 Bill Form / HCFA 1500 Form	7/16/2018	72148	\$ 912.00
5049	0521475600101129	ECLIPSE MEDICAL IMAGING PC	8/27/2018	NF-3 Bill Form / HCFA 1500 Form	7/19/2018	73221	\$ 878.67
5050	0521475600101129	ECLIPSE MEDICAL IMAGING PC	8/27/2018	NF-3 Bill Form / HCFA 1500 Form	7/19/2018	73721	\$ 659.00
5051	0629230770101016	ECLIPSE MEDICAL IMAGING PC	8/27/2018	NF-3 Bill Form / HCFA 1500 Form	7/19/2018	73221	\$ 659.00
5052	0629230770101016	ECLIPSE MEDICAL IMAGING PC	8/27/2018	NF-3 Bill Form / HCFA 1500 Form	7/19/2018	73721	\$ 878.67
5053	0347310840101070	ECLIPSE MEDICAL IMAGING PC	8/27/2018	NF-3 Bill Form / HCFA 1500 Form	7/18/2018	73721	\$ 878.67
5054	0552961600101013	ECLIPSE MEDICAL IMAGING PC	8/27/2018	NF-3 Bill Form / HCFA 1500 Form	7/16/2018	72141	\$ 879.73
5055	0300407930101021	ECLIPSE MEDICAL IMAGING PC	8/27/2018	NF-3 Bill Form / HCFA 1500 Form	7/15/2018	72148	\$ 912.00
5056	0300407930101021	ECLIPSE MEDICAL IMAGING PC	8/27/2018	NF-3 Bill Form / HCFA 1500 Form	7/15/2018	72141	\$ 659.79
5057	0091030630101035	ECLIPSE MEDICAL IMAGING PC	8/27/2018	NF-3 Bill Form / HCFA 1500 Form	7/17/2018	72141	\$ 879.73
5058	0091030630101035	ECLIPSE MEDICAL IMAGING PC	8/27/2018	NF-3 Bill Form / HCFA 1500 Form	7/17/2018	73721	\$ 659.00
5059	0552961600101013	ECLIPSE MEDICAL IMAGING PC	8/27/2018	NF-3 Bill Form / HCFA 1500 Form	7/16/2018	72148	\$ 912.00
5060	0620574130101011	ECLIPSE MEDICAL IMAGING PC	8/31/2018	NF-3 Bill Form / HCFA 1500 Form	7/23/2018	72141	\$ 659.79
5061	0620574130101011	ECLIPSE MEDICAL IMAGING PC	8/31/2018	NF-3 Bill Form / HCFA 1500 Form	7/23/2018	72148	\$ 912.00
5062	0301019750101046	ECLIPSE MEDICAL IMAGING PC	8/31/2018	NF-3 Bill Form / HCFA 1500 Form	7/24/2018	72141	\$ 879.73
5063	0582809360101018	ECLIPSE MEDICAL IMAGING PC	8/31/2018	NF-3 Bill Form / HCFA 1500 Form	7/24/2018	72148	\$ 912.00
5064	0563706180101025	ECLIPSE MEDICAL IMAGING PC	9/4/2018	NF-3 Bill Form / HCFA 1500 Form	7/25/2018	72141	\$ 659.79
5065	0563706180101025	ECLIPSE MEDICAL IMAGING PC	9/4/2018	NF-3 Bill Form / HCFA 1500 Form	7/25/2018	72148	\$ 912.00
5066	0563706180101025	ECLIPSE MEDICAL IMAGING PC	9/4/2018	NF-3 Bill Form / HCFA 1500 Form	7/25/2018	73120	\$ 47.61
5067	0620574130101011	ECLIPSE MEDICAL IMAGING PC	9/4/2018	NF-3 Bill Form / HCFA 1500 Form	7/25/2018	72146	\$ 959.61
5068	0160271260101038	ECLIPSE MEDICAL IMAGING PC	9/4/2018	NF-3 Bill Form / HCFA 1500 Form	7/25/2018	70540	\$ 936.33
5069	030642470101101	ECLIPSE MEDICAL IMAGING PC	9/4/2018	NF-3 Bill Form / HCFA 1500 Form	7/25/2018	73221	\$ 878.67
5070	0451011880101028	ECLIPSE MEDICAL IMAGING PC	9/7/2018	NF-3 Bill Form / HCFA 1500 Form	7/26/2018	73221	\$ 878.67
5071	0548795880101013	ECLIPSE MEDICAL IMAGING PC	9/7/2018	NF-3 Bill Form / HCFA 1500 Form	7/26/2018	72040	\$ 96.27
5072	0298024690101093	ECLIPSE MEDICAL IMAGING PC	9/7/2018	NF-3 Bill Form / HCFA 1500 Form	7/27/2018	73221	\$ 878.67
5073	0357598170101168	ECLIPSE MEDICAL IMAGING PC	9/7/2018	NF-3 Bill Form / HCFA 1500 Form	7/26/2018	73721	\$ 878.67
5074	0357598170101168	ECLIPSE MEDICAL IMAGING PC	9/7/2018	NF-3 Bill Form / HCFA 1500 Form	7/26/2018	73221	\$ 659.00
5075	0298024690101093	ECLIPSE MEDICAL IMAGING PC	9/7/2018	NF-3 Bill Form / HCFA 1500 Form	7/27/2018	73721	\$ 878.67
5076	0315593330101118	ECLIPSE MEDICAL IMAGING PC	9/7/2018	NF-3 Bill Form / HCFA 1500 Form	7/27/2018	73721	\$ 878.67
5077	053642470101023	ECLIPSE MEDICAL IMAGING PC	9/7/2018	NF-3 Bill Form / HCFA 1500 Form	7/26/2018	73221	\$ 878.67
5078	0371605930101040	ECLIPSE MEDICAL IMAGING PC	9/7/2018	NF-3 Bill Form / HCFA 1500 Form	7/26/2018	72141	\$ 879.73
5079	0500350790101020	ECLIPSE MEDICAL IMAGING PC	9/10/2018	NF-3 Bill Form / HCFA 1500 Form	7/30/2018	73221	\$ 878.67
5080	0500350790101020	ECLIPSE MEDICAL IMAGING PC	9/10/2018	NF-3 Bill Form / HCFA 1500 Form	7/30/2018	73721	\$ 659.00
5081	0371605930101040	ECLIPSE MEDICAL IMAGING PC	9/10/2018	NF-3 Bill Form / HCFA 1500 Form	7/30/2018	72148	\$ 912.00
5082	0357598170101168	ECLIPSE MEDICAL IMAGING PC	9/10/2018	NF-3 Bill Form / HCFA 1500 Form	7/29/2018	73221	\$ 878.67
5083	0183749990101025	ECLIPSE MEDICAL IMAGING PC	9/11/2018	NF-3 Bill Form / HCFA 1500 Form	7/27/2018	72131	\$ 581.90
5084	0183749990101025	ECLIPSE MEDICAL IMAGING PC	9/11/2018	NF-3 Bill Form / HCFA 1500 Form	7/27/2018	73200	\$ 365.01
5085	0091030630101035	ECLIPSE MEDICAL IMAGING PC	9/14/2018	NF-3 Bill Form / HCFA 1500 Form	7/31/2018	72148	\$ 912.00
5086	0556660810101021	ECLIPSE MEDICAL IMAGING PC	9/14/2018	NF-3 Bill Form / HCFA 1500 Form	8/2/2018	72141	\$ 879.73
5087	0632552340101019	ECLIPSE MEDICAL IMAGING PC	9/14/2018	NF-3 Bill Form / HCFA 1500 Form	7/31/2018	73721	\$ 878.67
5088	0595934380101015	ECLIPSE MEDICAL IMAGING PC	9/14/2018	NF-3 Bill Form / HCFA 1500 Form	8/1/2018	73721	\$ 878.67
5089	0589981740101043	ECLIPSE MEDICAL IMAGING PC	9/14/2018	NF-3 Bill Form / HCFA 1500 Form	8/1/2018	72141	\$ 879.73
5090	0398508720101072	ECLIPSE MEDICAL IMAGING PC	9/14/2018	NF-3 Bill Form / HCFA 1500 Form	8/1/2018	72141	\$ 659.79
5091	0398508720101072	ECLIPSE MEDICAL IMAGING PC	9/14/2018	NF-3 Bill Form / HCFA 1500 Form	8/1/2018	72148	\$ 912.00
5092	0282543720101086	ECLIPSE MEDICAL IMAGING PC	9/14/2018	NF-3 Bill Form / HCFA 1500 Form	7/31/2018	73221	\$ 659.00
5093	0282543720101086	ECLIPSE MEDICAL IMAGING PC	9/14/2018	NF-3 Bill Form / HCFA 1500 Form	7/31/2018	72148	\$ 912.00
5094	0600234340101046	ECLIPSE MEDICAL IMAGING PC	9/14/2018	NF-3 Bill Form / HCFA 1500 Form	8/1/2018	73200	\$ 486.68
5095	0560925580101020	ECLIPSE MEDICAL IMAGING PC	9/14/2018	NF-3 Bill Form / HCFA 1500 Form	7/31/2018	72070	\$ 69.82
5096	0560925580101020	ECLIPSE MEDICAL IMAGING PC	9/14/2018	NF-3 Bill Form / HCFA 1500 Form	7/31/2018	73030	\$ 94.69
5097	0560925580101020	ECLIPSE MEDICAL IMAGING PC	9/14/2018	NF-3 Bill Form / HCFA 1500 Form	7/31/2018	73221	\$ 878.67
5098	0282543720101086	ECLIPSE MEDICAL IMAGING PC	9/14/2018	NF-3 Bill Form / HCFA 1500 Form	8/2/2018	72141	\$ 879.73
5099	0545386600101013	ECLIPSE MEDICAL IMAGING PC	9/14/2018	NF-3 Bill Form / HCFA 1500 Form	8/2/2018	73721	\$ 878.67
5100	0538198980101045	ECLIPSE MEDICAL IMAGING PC	9/14/2018	NF-3 Bill Form / HCFA 1500 Form	8/1/2018	73221	\$ 878.67
5101	0529756120101026	ECLIPSE MEDICAL IMAGING PC	9/14/2018	NF-3 Bill Form / HCFA 1500 Form	8/1/2018	72148	\$ 912.00
5102	0529756120101026	ECLIPSE MEDICAL IMAGING PC	9/14/2018	NF-3 Bill Form / HCFA 1500 Form	8/1/2018	72141	\$ 659.79
5103	0596108600101019	ECLIPSE MEDICAL IMAGING PC	9/17/2018	NF-3 Bill Form / HCFA 1500 Form	8/5/2018	72141	\$ 659.79
5104	0596108600101019	ECLIPSE MEDICAL IMAGING PC	9/17/2018	NF-3 Bill Form / HCFA 1500 Form	8/5/2018	72148	\$ 912.00
5105	0306416870101101	ECLIPSE MEDICAL IMAGING PC	9/17/2018	NF-3 Bill Form / HCFA 1500 Form	8/3/2018	73221	\$ 878.67
5106	0589254180101075	ECLIPSE MEDICAL IMAGING PC	9/17/2018	NF-3 Bill Form / HCFA 1500 Form	8/7/2018	72141	\$ 879.73
5107	0454271330101021	ECLIPSE MEDICAL IMAGING PC	9/17/2018	NF-3 Bill Form / HCFA 1500 Form	8/3/2018	72148	\$ 912.00
5108	0524277840101019	ECLIPSE MEDICAL IMAGING PC	9/17/2018	NF-3 Bill Form / HCFA 1500 Form	8/5/2018	73721	\$ 878.67
5109	0629230770101016	ECLIPSE MEDICAL IMAGING PC	9/17/2018	NF-3 Bill Form / HCFA 1500 Form	8/6/2018	72148	\$ 912.00
5110	0629230770101016	ECLIPSE MEDICAL IMAGING PC	9/17/2018	NF-3 Bill Form / HCFA 1500 Form	8/6/2018	72141	\$ 659.79

Government Employees Insurance Company, et al v. Eclipse Medical Imaging, et al
Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
5111	0462824810101059	ECLIPSE MEDICAL IMAGING PC	9/17/2018	NF-3 Bill Form / HCFA 1500 Form	8/5/2018	72148	\$ 912.00
5112	0521475600101129	ECLIPSE MEDICAL IMAGING PC	9/17/2018	NF-3 Bill Form / HCFA 1500 Form	8/7/2018	72141	\$ 659.79
5113	0521475600101129	ECLIPSE MEDICAL IMAGING PC	9/17/2018	NF-3 Bill Form / HCFA 1500 Form	8/7/2018	72148	\$ 912.00
5114	0485706420101012	ECLIPSE MEDICAL IMAGING PC	9/17/2018	NF-3 Bill Form / HCFA 1500 Form	8/6/2018	72148	\$ 912.00
5115	0407596780101107	ECLIPSE MEDICAL IMAGING PC	9/18/2018	NF-3 Bill Form / HCFA 1500 Form	8/7/2018	70551	\$ 874.44
5116	0629230770101016	ECLIPSE MEDICAL IMAGING PC	9/18/2018	NF-3 Bill Form / HCFA 1500 Form	8/7/2018	72148	\$ 912.00
5117	0629230770101016	ECLIPSE MEDICAL IMAGING PC	9/18/2018	NF-3 Bill Form / HCFA 1500 Form	8/7/2018	72141	\$ 659.79
5118	0534569850101030	ECLIPSE MEDICAL IMAGING PC	9/20/2018	NF-3 Bill Form / HCFA 1500 Form	8/10/2018	72148	\$ 912.00
5119	0454271330101021	ECLIPSE MEDICAL IMAGING PC	9/20/2018	NF-3 Bill Form / HCFA 1500 Form	8/10/2018	72141	\$ 879.73
5120	0560925580101020	ECLIPSE MEDICAL IMAGING PC	9/20/2018	NF-3 Bill Form / HCFA 1500 Form	8/12/2018	72141	\$ 659.79
5121	0560925580101020	ECLIPSE MEDICAL IMAGING PC	9/20/2018	NF-3 Bill Form / HCFA 1500 Form	8/12/2018	72148	\$ 912.00
5122	0560925580101020	ECLIPSE MEDICAL IMAGING PC	9/20/2018	NF-3 Bill Form / HCFA 1500 Form	8/10/2018	72148	\$ 912.00
5123	0560925580101020	ECLIPSE MEDICAL IMAGING PC	9/20/2018	NF-3 Bill Form / HCFA 1500 Form	8/10/2018	72141	\$ 659.79
5124	0462824810101059	ECLIPSE MEDICAL IMAGING PC	9/21/2018	NF-3 Bill Form / HCFA 1500 Form	8/12/2018	73721	\$ 878.67
5125	0535179680101017	ECLIPSE MEDICAL IMAGING PC	9/24/2018	NF-3 Bill Form / HCFA 1500 Form	8/14/2018	72148	\$ 912.00
5126	0535179680101017	ECLIPSE MEDICAL IMAGING PC	9/24/2018	NF-3 Bill Form / HCFA 1500 Form	8/14/2018	72141	\$ 659.79
5127	0556660810101021	ECLIPSE MEDICAL IMAGING PC	9/24/2018	NF-3 Bill Form / HCFA 1500 Form	8/13/2018	72148	\$ 912.00
5128	0556660810101021	ECLIPSE MEDICAL IMAGING PC	9/24/2018	NF-3 Bill Form / HCFA 1500 Form	8/13/2018	72141	\$ 879.73
5129	0365020290101010	ECLIPSE MEDICAL IMAGING PC	9/24/2018	NF-3 Bill Form / HCFA 1500 Form	8/13/2018	72148	\$ 912.00
5130	0365020290101010	ECLIPSE MEDICAL IMAGING PC	9/24/2018	NF-3 Bill Form / HCFA 1500 Form	8/13/2018	73221	\$ 659.00
5131	0538198980101045	ECLIPSE MEDICAL IMAGING PC	9/24/2018	NF-3 Bill Form / HCFA 1500 Form	8/13/2018	72141	\$ 879.73
5132	0538198980101045	ECLIPSE MEDICAL IMAGING PC	9/24/2018	NF-3 Bill Form / HCFA 1500 Form	8/13/2018	73221	\$ 659.00
5133	0365020290101010	ECLIPSE MEDICAL IMAGING PC	9/27/2018	NF-3 Bill Form / HCFA 1500 Form	8/16/2018	73721	\$ 659.00
5134	0365020290101010	ECLIPSE MEDICAL IMAGING PC	9/27/2018	NF-3 Bill Form / HCFA 1500 Form	8/16/2018	72141	\$ 879.73
5135	0625654600101017	ECLIPSE MEDICAL IMAGING PC	9/27/2018	NF-3 Bill Form / HCFA 1500 Form	8/17/2018	73221	\$ 878.67
5136	0500350790101020	ECLIPSE MEDICAL IMAGING PC	9/27/2018	NF-3 Bill Form / HCFA 1500 Form	8/19/2018	72148	\$ 912.00
5137	0500350790101020	ECLIPSE MEDICAL IMAGING PC	9/27/2018	NF-3 Bill Form / HCFA 1500 Form	8/19/2018	72141	\$ 659.79
5138	0610536790101039	ECLIPSE MEDICAL IMAGING PC	9/27/2018	NF-3 Bill Form / HCFA 1500 Form	8/19/2018	72148	\$ 912.00
5139	0545386600101013	ECLIPSE MEDICAL IMAGING PC	9/28/2018	NF-3 Bill Form / HCFA 1500 Form	8/16/2018	72141	\$ 879.73
5140	0538198980101045	ECLIPSE MEDICAL IMAGING PC	10/1/2018	NF-3 Bill Form / HCFA 1500 Form	8/20/2018	72148	\$ 912.00
5141	0635693470101010	ECLIPSE MEDICAL IMAGING PC	10/1/2018	NF-3 Bill Form / HCFA 1500 Form	8/20/2018	73721	\$ 878.67
5142	0538399680101034	ECLIPSE MEDICAL IMAGING PC	10/1/2018	NF-3 Bill Form / HCFA 1500 Form	8/24/2018	72141	\$ 879.73
5143	0302095010101041	ECLIPSE MEDICAL IMAGING PC	10/1/2018	NF-3 Bill Form / HCFA 1500 Form	8/21/2018	73721	\$ 878.67
5144	0474335320101030	ECLIPSE MEDICAL IMAGING PC	10/1/2018	NF-3 Bill Form / HCFA 1500 Form	8/24/2018	72141	\$ 659.79
5145	0474335320101030	ECLIPSE MEDICAL IMAGING PC	10/1/2018	NF-3 Bill Form / HCFA 1500 Form	8/24/2018	72148	\$ 912.00
5146	0535179680101017	ECLIPSE MEDICAL IMAGING PC	10/1/2018	NF-3 Bill Form / HCFA 1500 Form	8/23/2018	72148	\$ 912.00
5147	0535179680101017	ECLIPSE MEDICAL IMAGING PC	10/1/2018	NF-3 Bill Form / HCFA 1500 Form	8/23/2018	72141	\$ 659.79
5148	0589254180101075	ECLIPSE MEDICAL IMAGING PC	10/1/2018	NF-3 Bill Form / HCFA 1500 Form	8/21/2018	72146	\$ 959.61
5149	0576364260101013	ECLIPSE MEDICAL IMAGING PC	10/1/2018	NF-3 Bill Form / HCFA 1500 Form	11/24/2017	72141	\$ 659.79
5150	0576364260101013	ECLIPSE MEDICAL IMAGING PC	10/1/2018	NF-3 Bill Form / HCFA 1500 Form	11/24/2017	72148	\$ 912.00
5151	0576364260101013	ECLIPSE MEDICAL IMAGING PC	10/1/2018	NF-3 Bill Form / HCFA 1500 Form	6/26/2018	73221	\$ 878.67
5152	0576364260101013	ECLIPSE MEDICAL IMAGING PC	10/1/2018	NF-3 Bill Form / HCFA 1500 Form	6/26/2018	73721	\$ 659.00
5153	0614245180101015	ECLIPSE MEDICAL IMAGING PC	10/1/2018	NF-3 Bill Form / HCFA 1500 Form	8/24/2018	73721	\$ 878.67
5154	0388566740101045	ECLIPSE MEDICAL IMAGING PC	10/2/2018	NF-3 Bill Form / HCFA 1500 Form	8/26/2018	73221	\$ 659.00
5155	0388566740101045	ECLIPSE MEDICAL IMAGING PC	10/2/2018	NF-3 Bill Form / HCFA 1500 Form	8/26/2018	73721	\$ 878.67
5156	0582974270101019	ECLIPSE MEDICAL IMAGING PC	10/8/2018	NF-3 Bill Form / HCFA 1500 Form	8/28/2018	73721	\$ 878.67
5157	0415622620101063	ECLIPSE MEDICAL IMAGING PC	10/8/2018	NF-3 Bill Form / HCFA 1500 Form	8/28/2018	73721	\$ 878.67
5158	0292425160101081	ECLIPSE MEDICAL IMAGING PC	10/8/2018	NF-3 Bill Form / HCFA 1500 Form	8/28/2018	73721	\$ 659.00
5159	0292425160101081	ECLIPSE MEDICAL IMAGING PC	10/8/2018	NF-3 Bill Form / HCFA 1500 Form	8/28/2018	72141	\$ 879.73
5160	0177927690101044	ECLIPSE MEDICAL IMAGING PC	10/8/2018	NF-3 Bill Form / HCFA 1500 Form	8/28/2018	73721	\$ 878.67
5161	0292425160101081	ECLIPSE MEDICAL IMAGING PC	10/9/2018	NF-3 Bill Form / HCFA 1500 Form	8/30/2018	73721	\$ 878.67
5162	0534547460101046	ECLIPSE MEDICAL IMAGING PC	10/9/2018	NF-3 Bill Form / HCFA 1500 Form	8/29/2018	73221	\$ 878.67
5163	0407596780101107	ECLIPSE MEDICAL IMAGING PC	10/9/2018	NF-3 Bill Form / HCFA 1500 Form	8/30/2018	72141	\$ 659.79
5164	0407596780101107	ECLIPSE MEDICAL IMAGING PC	10/9/2018	NF-3 Bill Form / HCFA 1500 Form	8/30/2018	72148	\$ 912.00
5165	0092429520101064	ECLIPSE MEDICAL IMAGING PC	10/11/2018	NF-3 Bill Form / HCFA 1500 Form	8/29/2018	72141	\$ 879.73
5166	0287527540101058	ECLIPSE MEDICAL IMAGING PC	10/15/2018	NF-3 Bill Form / HCFA 1500 Form	9/2/2018	72148	\$ 912.00
5167	0425249920101011	ECLIPSE MEDICAL IMAGING PC	10/15/2018	NF-3 Bill Form / HCFA 1500 Form	8/31/2018	73721	\$ 878.67
5168	0302095010101041	ECLIPSE MEDICAL IMAGING PC	10/15/2018	NF-3 Bill Form / HCFA 1500 Form	8/31/2018	73221	\$ 878.67
5169	0174441230101293	ECLIPSE MEDICAL IMAGING PC	10/8/2018	NF-3 Bill Form / HCFA 1500 Form	8/28/2018	72141	\$ 879.73
5170	0534547460101046	ECLIPSE MEDICAL IMAGING PC	10/18/2018	NF-3 Bill Form / HCFA 1500 Form	9/4/2018	73721	\$ 878.67
5171	0534547460101046	ECLIPSE MEDICAL IMAGING PC	10/18/2018	NF-3 Bill Form / HCFA 1500 Form	9/4/2018	73221	\$ 659.00
5172	0540192020101046	ECLIPSE MEDICAL IMAGING PC	10/18/2018	NF-3 Bill Form / HCFA 1500 Form	9/4/2018	73221	\$ 878.67
5173	0625654600101017	ECLIPSE MEDICAL IMAGING PC	10/18/2018	NF-3 Bill Form / HCFA 1500 Form	9/4/2018	72148	\$ 912.00
5174	0625654600101017	ECLIPSE MEDICAL IMAGING PC	10/18/2018	NF-3 Bill Form / HCFA 1500 Form	9/4/2018	72141	\$ 659.79
5175	0474335320101030	ECLIPSE MEDICAL IMAGING PC	10/18/2018	NF-3 Bill Form / HCFA 1500 Form	9/6/2018	70551	\$ 874.44
5176	0489546880101110	ECLIPSE MEDICAL IMAGING PC	10/18/2018	NF-3 Bill Form / HCFA 1500 Form	9/5/2018	73721	\$ 878.67
5177	0583397550101021	ECLIPSE MEDICAL IMAGING PC	10/19/2018	NF-3 Bill Form / HCFA 1500 Form	9/5/2018	72141	\$ 659.79
5178	0583397550101021	ECLIPSE MEDICAL IMAGING PC	10/19/2018	NF-3 Bill Form / HCFA 1500 Form	9/5/2018	72148	\$ 912.00
5179	0615556410101016	ECLIPSE MEDICAL IMAGING PC	10/22/2018	NF-3 Bill Form / HCFA 1500 Form	9/7/2018	73221	\$ 878.67
5180	0092429520101064	ECLIPSE MEDICAL IMAGING PC	10/22/2018	NF-3 Bill Form / HCFA 1500 Form	9/7/2018	72148	\$ 912.00

Government Employees Insurance Company, et al v. Eclipse Medical Imaging, et al
Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
5181	0610536790101039	ECLIPSE MEDICAL IMAGING PC	10/22/2018	NF-3 Bill Form / HCFA 1500 Form	9/7/2018	72125	\$ 581.90
5182	0534547460101046	ECLIPSE MEDICAL IMAGING PC	10/22/2018	NF-3 Bill Form / HCFA 1500 Form	9/9/2018	73721	\$ 878.67
5183	0534547460101046	ECLIPSE MEDICAL IMAGING PC	10/22/2018	NF-3 Bill Form / HCFA 1500 Form	9/9/2018	73221	\$ 659.00
5184	0306523460101076	ECLIPSE MEDICAL IMAGING PC	10/22/2018	NF-3 Bill Form / HCFA 1500 Form	9/9/2018	73718	\$ 901.42
5185	0316340770101078	ECLIPSE MEDICAL IMAGING PC	10/22/2018	NF-3 Bill Form / HCFA 1500 Form	9/9/2018	73221	\$ 878.67
5186	0631070870101011	ECLIPSE MEDICAL IMAGING PC	10/22/2018	NF-3 Bill Form / HCFA 1500 Form	9/7/2018	72148	\$ 912.00
5187	0631070870101011	ECLIPSE MEDICAL IMAGING PC	10/22/2018	NF-3 Bill Form / HCFA 1500 Form	9/7/2018	73221	\$ 659.00
5188	0560214800101015	ECLIPSE MEDICAL IMAGING PC	10/22/2018	NF-3 Bill Form / HCFA 1500 Form	9/9/2018	73721	\$ 878.67
5189	0292425160101081	ECLIPSE MEDICAL IMAGING PC	10/25/2018	NF-3 Bill Form / HCFA 1500 Form	9/10/2018	73718	\$ 901.42
5190	0582809360101018	ECLIPSE MEDICAL IMAGING PC	10/25/2018	NF-3 Bill Form / HCFA 1500 Form	9/11/2018	73221	\$ 878.67
5191	0631070870101011	ECLIPSE MEDICAL IMAGING PC	10/25/2018	NF-3 Bill Form / HCFA 1500 Form	9/11/2018	72141	\$ 879.73
5192	0362845080101041	ECLIPSE MEDICAL IMAGING PC	10/25/2018	NF-3 Bill Form / HCFA 1500 Form	9/10/2018	73120	\$ 63.48
5193	0362845080101041	ECLIPSE MEDICAL IMAGING PC	10/25/2018	NF-3 Bill Form / HCFA 1500 Form	9/10/2018	73100	\$ 46.42
5194	0174441230101293	ECLIPSE MEDICAL IMAGING PC	10/25/2018	NF-3 Bill Form / HCFA 1500 Form	8/28/2018	72141	\$ 879.73
5195	0174441230101293	ECLIPSE MEDICAL IMAGING PC	10/25/2018	NF-3 Bill Form / HCFA 1500 Form	9/2/2018	72148	\$ 912.00
5196	0463109120101018	ECLIPSE MEDICAL IMAGING PC	10/26/2018	NF-3 Bill Form / HCFA 1500 Form	9/12/2018	73221	\$ 878.67
5197	0269683380101047	ECLIPSE MEDICAL IMAGING PC	10/29/2018	NF-3 Bill Form / HCFA 1500 Form	9/16/2018	73721	\$ 878.67
5198	0463109120101018	ECLIPSE MEDICAL IMAGING PC	10/29/2018	NF-3 Bill Form / HCFA 1500 Form	9/16/2018	73721	\$ 878.67
5199	0269683380101047	ECLIPSE MEDICAL IMAGING PC	10/29/2018	NF-3 Bill Form / HCFA 1500 Form	9/14/2018	73721	\$ 878.67
5200	0388566740101045	ECLIPSE MEDICAL IMAGING PC	10/30/2018	NF-3 Bill Form / HCFA 1500 Form	9/13/2018	72141	\$ 659.79
5201	0388566740101045	ECLIPSE MEDICAL IMAGING PC	10/30/2018	NF-3 Bill Form / HCFA 1500 Form	9/13/2018	72148	\$ 912.00
5202	0408595000101144	ECLIPSE MEDICAL IMAGING PC	10/31/2018	NF-3 Bill Form / HCFA 1500 Form	9/14/2018	72141	\$ 879.73
5203	0408595000101144	ECLIPSE MEDICAL IMAGING PC	10/31/2018	NF-3 Bill Form / HCFA 1500 Form	9/14/2018	73721	\$ 659.00
5204	0615556410101016	ECLIPSE MEDICAL IMAGING PC	11/1/2018	NF-3 Bill Form / HCFA 1500 Form	9/17/2018	72141	\$ 659.79
5205	0615556410101016	ECLIPSE MEDICAL IMAGING PC	11/1/2018	NF-3 Bill Form / HCFA 1500 Form	9/17/2018	72148	\$ 912.00
5206	0579858660101033	ECLIPSE MEDICAL IMAGING PC	11/1/2018	NF-3 Bill Form / HCFA 1500 Form	9/18/2018	72146	\$ 959.61
5207	0579858660101033	ECLIPSE MEDICAL IMAGING PC	11/1/2018	NF-3 Bill Form / HCFA 1500 Form	9/18/2018	73221	\$ 659.00
5208	0174441230101293	ECLIPSE MEDICAL IMAGING PC	11/1/2018	NF-3 Bill Form / HCFA 1500 Form	9/17/2018	73718	\$ 901.42
5209	0590479650101035	ECLIPSE MEDICAL IMAGING PC	11/1/2018	NF-3 Bill Form / HCFA 1500 Form	9/18/2018	73721	\$ 659.00
5210	0590479650101035	ECLIPSE MEDICAL IMAGING PC	11/1/2018	NF-3 Bill Form / HCFA 1500 Form	9/18/2018	73221	\$ 878.67
5211	0174441230101293	ECLIPSE MEDICAL IMAGING PC	11/1/2018	NF-3 Bill Form / HCFA 1500 Form	9/17/2018	73221	\$ 878.67
5212	0316340770101078	ECLIPSE MEDICAL IMAGING PC	11/1/2018	NF-3 Bill Form / HCFA 1500 Form	9/16/2018	72141	\$ 879.73
5213	0464843900101126	ECLIPSE MEDICAL IMAGING PC	11/1/2018	NF-3 Bill Form / HCFA 1500 Form	9/18/2018	72148	\$ 912.00
5214	0174441230101293	ECLIPSE MEDICAL IMAGING PC	10/15/2018	NF-3 Bill Form / HCFA 1500 Form	9/2/2018	72148	\$ 912.00
5215	0613598260101011	ECLIPSE MEDICAL IMAGING PC	11/5/2018	NF-3 Bill Form / HCFA 1500 Form	9/21/2018	73221	\$ 878.67
5216	0298024690101093	ECLIPSE MEDICAL IMAGING PC	11/5/2018	NF-3 Bill Form / HCFA 1500 Form	9/20/2018	73200	\$ 486.68
5217	053337200101014	ECLIPSE MEDICAL IMAGING PC	11/5/2018	NF-3 Bill Form / HCFA 1500 Form	9/21/2018	72141	\$ 879.73
5218	0609019050101018	ECLIPSE MEDICAL IMAGING PC	11/5/2018	NF-3 Bill Form / HCFA 1500 Form	9/23/2018	73721	\$ 878.67
5219	0534547460101046	ECLIPSE MEDICAL IMAGING PC	11/5/2018	NF-3 Bill Form / HCFA 1500 Form	9/21/2018	72148	\$ 912.00
5220	0534547460101046	ECLIPSE MEDICAL IMAGING PC	11/5/2018	NF-3 Bill Form / HCFA 1500 Form	9/21/2018	72141	\$ 659.79
5221	0608816910101034	ECLIPSE MEDICAL IMAGING PC	11/5/2018	NF-3 Bill Form / HCFA 1500 Form	9/21/2018	72141	\$ 659.79
5222	0608816910101034	ECLIPSE MEDICAL IMAGING PC	11/5/2018	NF-3 Bill Form / HCFA 1500 Form	9/21/2018	72148	\$ 912.00
5223	0575009300101041	ECLIPSE MEDICAL IMAGING PC	11/5/2018	NF-3 Bill Form / HCFA 1500 Form	9/20/2018	73221	\$ 878.67
5224	0298024690101093	ECLIPSE MEDICAL IMAGING PC	11/5/2018	NF-3 Bill Form / HCFA 1500 Form	9/20/2018	72131	\$ 581.90
5225	0106526700101105	ECLIPSE MEDICAL IMAGING PC	11/5/2018	NF-3 Bill Form / HCFA 1500 Form	9/23/2018	72148	\$ 912.00
5226	0106526700101105	ECLIPSE MEDICAL IMAGING PC	11/5/2018	NF-3 Bill Form / HCFA 1500 Form	9/23/2018	72141	\$ 659.79
5227	0174441230101293	ECLIPSE MEDICAL IMAGING PC	11/5/2018	NF-3 Bill Form / HCFA 1500 Form	9/23/2018	72148	\$ 912.00
5228	0575009300101041	ECLIPSE MEDICAL IMAGING PC	11/5/2018	NF-3 Bill Form / HCFA 1500 Form	9/20/2018	73721	\$ 878.67
5229	0609019050101018	ECLIPSE MEDICAL IMAGING PC	11/5/2018	NF-3 Bill Form / HCFA 1500 Form	9/23/2018	72148	\$ 912.00
5230	0534547460101046	ECLIPSE MEDICAL IMAGING PC	11/7/2018	NF-3 Bill Form / HCFA 1500 Form	9/20/2018	72148	\$ 912.00
5231	0534547460101046	ECLIPSE MEDICAL IMAGING PC	11/7/2018	NF-3 Bill Form / HCFA 1500 Form	9/20/2018	72141	\$ 659.79
5232	0414169020101054	ECLIPSE MEDICAL IMAGING PC	11/8/2018	NF-3 Bill Form / HCFA 1500 Form	9/26/2018	73721	\$ 878.67
5233	0489546880101110	ECLIPSE MEDICAL IMAGING PC	11/8/2018	NF-3 Bill Form / HCFA 1500 Form	9/26/2018	72148	\$ 912.00
5234	0613598260101011	ECLIPSE MEDICAL IMAGING PC	11/8/2018	NF-3 Bill Form / HCFA 1500 Form	9/24/2018	73221	\$ 878.67
5235	0298024690101093	ECLIPSE MEDICAL IMAGING PC	11/8/2018	NF-3 Bill Form / HCFA 1500 Form	9/24/2018	72128	\$ 581.90
5236	0124794950101252	ECLIPSE MEDICAL IMAGING PC	11/8/2018	NF-3 Bill Form / HCFA 1500 Form	9/24/2018	73721	\$ 659.00
5237	0124794950101252	ECLIPSE MEDICAL IMAGING PC	11/8/2018	NF-3 Bill Form / HCFA 1500 Form	9/24/2018	73221	\$ 878.67
5238	0633411520101027	ECLIPSE MEDICAL IMAGING PC	11/8/2018	NF-3 Bill Form / HCFA 1500 Form	9/24/2018	73221	\$ 878.67
5239	0298024690101093	ECLIPSE MEDICAL IMAGING PC	11/8/2018	NF-3 Bill Form / HCFA 1500 Form	9/24/2018	72125	\$ 581.90
5240	0459248120101051	ECLIPSE MEDICAL IMAGING PC	11/8/2018	NF-3 Bill Form / HCFA 1500 Form	9/26/2018	73221	\$ 878.67
5241	0534569850101030	ECLIPSE MEDICAL IMAGING PC	11/8/2018	NF-3 Bill Form / HCFA 1500 Form	9/26/2018	72141	\$ 879.73
5242	0298024690101093	ECLIPSE MEDICAL IMAGING PC	11/8/2018	NF-3 Bill Form / HCFA 1500 Form	9/26/2018	72131	\$ 581.90
5243	0534547460101046	ECLIPSE MEDICAL IMAGING PC	11/8/2018	NF-3 Bill Form / HCFA 1500 Form	9/25/2018	72148	\$ 912.00
5244	0534547460101046	ECLIPSE MEDICAL IMAGING PC	11/8/2018	NF-3 Bill Form / HCFA 1500 Form	9/25/2018	72141	\$ 659.79
5245	0415622620101063	ECLIPSE MEDICAL IMAGING PC	11/12/2018	NF-3 Bill Form / HCFA 1500 Form	9/27/2018	72131	\$ 581.90
5246	0415622620101063	ECLIPSE MEDICAL IMAGING PC	11/12/2018	NF-3 Bill Form / HCFA 1500 Form	9/27/2018	72125	\$ 436.42
5247	053337200101014	ECLIPSE MEDICAL IMAGING PC	11/12/2018	NF-3 Bill Form / HCFA 1500 Form	9/27/2018	72148	\$ 912.00
5248	0615556410101016	ECLIPSE MEDICAL IMAGING PC	11/12/2018	NF-3 Bill Form / HCFA 1500 Form	9/27/2018	73718	\$ 901.42
5249	0414169020101054	ECLIPSE MEDICAL IMAGING PC	11/12/2018	NF-3 Bill Form / HCFA 1500 Form	9/28/2018	73221	\$ 878.67
5250	0534547460101046	ECLIPSE MEDICAL IMAGING PC	11/12/2018	NF-3 Bill Form / HCFA 1500 Form	9/28/2018	73721	\$ 878.67

Government Employees Insurance Company, et al v. Eclipse Medical Imaging, et al
Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
5251	0300840550101105	ECLIPSE MEDICAL IMAGING PC	11/12/2018	NF-3 Bill Form / HCFA 1500 Form	9/30/2018	73721	\$ 878.67
5252	0633411520101027	ECLIPSE MEDICAL IMAGING PC	11/12/2018	NF-3 Bill Form / HCFA 1500 Form	9/27/2018	73221	\$ 878.67
5253	0239413990101121	ECLIPSE MEDICAL IMAGING PC	11/12/2018	NF-3 Bill Form / HCFA 1500 Form	9/28/2018	72148	\$ 912.00
5254	0239413990101121	ECLIPSE MEDICAL IMAGING PC	11/12/2018	NF-3 Bill Form / HCFA 1500 Form	9/28/2018	72141	\$ 659.79
5255	0448236830101044	ECLIPSE MEDICAL IMAGING PC	11/12/2018	NF-3 Bill Form / HCFA 1500 Form	9/27/2018	73221	\$ 878.67
5256	0292425160101081	ECLIPSE MEDICAL IMAGING PC	11/12/2018	NF-3 Bill Form / HCFA 1500 Form	9/27/2018	72148	\$ 912.00
5257	0579858660101033	ECLIPSE MEDICAL IMAGING PC	11/16/2018	NF-3 Bill Form / HCFA 1500 Form	10/2/2018	73221	\$ 439.33
5258	0579858660101033	ECLIPSE MEDICAL IMAGING PC	11/16/2018	NF-3 Bill Form / HCFA 1500 Form	10/2/2018	72141	\$ 879.73
5259	0452241930101053	ECLIPSE MEDICAL IMAGING PC	11/16/2018	NF-3 Bill Form / HCFA 1500 Form	10/2/2018	73721	\$ 659.00
5260	0452241930101053	ECLIPSE MEDICAL IMAGING PC	11/16/2018	NF-3 Bill Form / HCFA 1500 Form	10/2/2018	72141	\$ 879.73
5261	0321099470101027	ECLIPSE MEDICAL IMAGING PC	11/16/2018	NF-3 Bill Form / HCFA 1500 Form	10/2/2018	73600	\$ 54.75
5262	0321099470101027	ECLIPSE MEDICAL IMAGING PC	11/16/2018	NF-3 Bill Form / HCFA 1500 Form	10/2/2018	72141	\$ 879.73
5263	0391816420101020	ECLIPSE MEDICAL IMAGING PC	11/16/2018	NF-3 Bill Form / HCFA 1500 Form	10/3/2018	72141	\$ 659.79
5264	0391816420101020	ECLIPSE MEDICAL IMAGING PC	11/16/2018	NF-3 Bill Form / HCFA 1500 Form	10/3/2018	72148	\$ 912.00
5265	0627765060101012	ECLIPSE MEDICAL IMAGING PC	11/16/2018	NF-3 Bill Form / HCFA 1500 Form	10/3/2018	72141	\$ 879.73
5266	0418813110101021	ECLIPSE MEDICAL IMAGING PC	11/16/2018	NF-3 Bill Form / HCFA 1500 Form	10/3/2018	73221	\$ 878.67
5267	0321099470101027	ECLIPSE MEDICAL IMAGING PC	11/16/2018	NF-3 Bill Form / HCFA 1500 Form	10/2/2018	73700	\$ 486.68
5268	0540192020101046	ECLIPSE MEDICAL IMAGING PC	11/19/2018	NF-3 Bill Form / HCFA 1500 Form	10/7/2018	73221	\$ 878.67
5269	0445317400101037	ECLIPSE MEDICAL IMAGING PC	11/19/2018	NF-3 Bill Form / HCFA 1500 Form	10/5/2018	72141	\$ 659.79
5270	0445317400101037	ECLIPSE MEDICAL IMAGING PC	11/19/2018	NF-3 Bill Form / HCFA 1500 Form	10/5/2018	72148	\$ 912.00
5271	054772200101029	ECLIPSE MEDICAL IMAGING PC	11/19/2018	NF-3 Bill Form / HCFA 1500 Form	10/4/2018	73721	\$ 659.00
5272	054772200101029	ECLIPSE MEDICAL IMAGING PC	11/19/2018	NF-3 Bill Form / HCFA 1500 Form	10/4/2018	73221	\$ 878.67
5273	0269683380101047	ECLIPSE MEDICAL IMAGING PC	11/19/2018	NF-3 Bill Form / HCFA 1500 Form	10/1/2018	72148	\$ 912.00
5274	0269683380101047	ECLIPSE MEDICAL IMAGING PC	11/19/2018	NF-3 Bill Form / HCFA 1500 Form	10/1/2018	72141	\$ 659.79
5275	0437392900101027	ECLIPSE MEDICAL IMAGING PC	11/19/2018	NF-3 Bill Form / HCFA 1500 Form	10/1/2018	72141	\$ 659.79
5276	0437392900101027	ECLIPSE MEDICAL IMAGING PC	11/19/2018	NF-3 Bill Form / HCFA 1500 Form	10/1/2018	72148	\$ 912.00
5277	0344547280101010	ECLIPSE MEDICAL IMAGING PC	11/19/2018	NF-3 Bill Form / HCFA 1500 Form	10/8/2018	72148	\$ 912.00
5278	0427529150101015	ECLIPSE MEDICAL IMAGING PC	11/19/2018	NF-3 Bill Form / HCFA 1500 Form	10/8/2018	73721	\$ 878.67
5279	054772200101029	ECLIPSE MEDICAL IMAGING PC	11/19/2018	NF-3 Bill Form / HCFA 1500 Form	10/8/2018	72148	\$ 912.00
5280	054772200101029	ECLIPSE MEDICAL IMAGING PC	11/19/2018	NF-3 Bill Form / HCFA 1500 Form	10/8/2018	73221	\$ 659.00
5281	0557123720101036	ECLIPSE MEDICAL IMAGING PC	11/19/2018	NF-3 Bill Form / HCFA 1500 Form	10/7/2018	72141	\$ 879.73
5282	0119465850101166	ECLIPSE MEDICAL IMAGING PC	11/19/2018	NF-3 Bill Form / HCFA 1500 Form	4/25/2018	73560	\$ 60.70
5283	0119465850101166	ECLIPSE MEDICAL IMAGING PC	11/19/2018	NF-3 Bill Form / HCFA 1500 Form	4/25/2018	72170	\$ 57.54
5284	0119465850101166	ECLIPSE MEDICAL IMAGING PC	11/19/2018	NF-3 Bill Form / HCFA 1500 Form	4/25/2018	73510	\$ 62.68
5285	0119465850101166	ECLIPSE MEDICAL IMAGING PC	11/19/2018	NF-3 Bill Form / HCFA 1500 Form	4/25/2018	73510	\$ 62.68
5286	0119465850101166	ECLIPSE MEDICAL IMAGING PC	11/19/2018	NF-3 Bill Form / HCFA 1500 Form	4/25/2018	73721	\$ 878.67
5287	0119465850101166	ECLIPSE MEDICAL IMAGING PC	11/19/2018	NF-3 Bill Form / HCFA 1500 Form	7/11/2018	72148	\$ 912.00
5288	0235735250101019	ECLIPSE MEDICAL IMAGING PC	11/19/2018	NF-3 Bill Form / HCFA 1500 Form	10/5/2018	72148	\$ 912.00
5289	0235735250101019	ECLIPSE MEDICAL IMAGING PC	11/19/2018	NF-3 Bill Form / HCFA 1500 Form	10/5/2018	72070	\$ 69.82
5290	0235735250101019	ECLIPSE MEDICAL IMAGING PC	11/19/2018	NF-3 Bill Form / HCFA 1500 Form	10/5/2018	72141	\$ 659.79
5291	0583360120101038	ECLIPSE MEDICAL IMAGING PC	11/19/2018	NF-3 Bill Form / HCFA 1500 Form	10/8/2018	73221	\$ 878.67
5292	0302095010101041	ECLIPSE MEDICAL IMAGING PC	11/23/2018	NF-3 Bill Form / HCFA 1500 Form	10/14/2018	73718	\$ 901.42
5293	0613598260101011	ECLIPSE MEDICAL IMAGING PC	11/23/2018	NF-3 Bill Form / HCFA 1500 Form	10/11/2018	72141	\$ 659.79
5294	0613598260101011	ECLIPSE MEDICAL IMAGING PC	11/23/2018	NF-3 Bill Form / HCFA 1500 Form	10/11/2018	72148	\$ 912.00
5295	0611984070101031	ECLIPSE MEDICAL IMAGING PC	11/23/2018	NF-3 Bill Form / HCFA 1500 Form	10/12/2018	73721	\$ 878.67
5296	0306099520101018	ECLIPSE MEDICAL IMAGING PC	11/23/2018	NF-3 Bill Form / HCFA 1500 Form	10/14/2018	73721	\$ 878.67
5297	0316340770101078	ECLIPSE MEDICAL IMAGING PC	11/23/2018	NF-3 Bill Form / HCFA 1500 Form	10/14/2018	72148	\$ 912.00
5298	0461341240101014	ECLIPSE MEDICAL IMAGING PC	11/20/2018	NF-3 Bill Form / HCFA 1500 Form	10/10/2018	73721	\$ 878.67
5299	054772200101029	ECLIPSE MEDICAL IMAGING PC	11/26/2018	NF-3 Bill Form / HCFA 1500 Form	10/11/2018	73721	\$ 659.00
5300	054772200101029	ECLIPSE MEDICAL IMAGING PC	11/26/2018	NF-3 Bill Form / HCFA 1500 Form	10/11/2018	72141	\$ 879.73
5301	0492230940101098	ECLIPSE MEDICAL IMAGING PC	11/26/2018	NF-3 Bill Form / HCFA 1500 Form	10/14/2018	72141	\$ 659.79
5302	0492230940101098	ECLIPSE MEDICAL IMAGING PC	11/26/2018	NF-3 Bill Form / HCFA 1500 Form	10/14/2018	72148	\$ 912.00
5303	0176056780101036	ECLIPSE MEDICAL IMAGING PC	11/26/2018	NF-3 Bill Form / HCFA 1500 Form	10/12/2018	72141	\$ 659.79
5304	0176056780101036	ECLIPSE MEDICAL IMAGING PC	11/26/2018	NF-3 Bill Form / HCFA 1500 Form	10/12/2018	72148	\$ 912.00
5305	0618844640101015	ECLIPSE MEDICAL IMAGING PC	11/26/2018	NF-3 Bill Form / HCFA 1500 Form	10/11/2018	72148	\$ 912.00
5306	0531686640101014	ECLIPSE MEDICAL IMAGING PC	11/29/2018	NF-3 Bill Form / HCFA 1500 Form	10/19/2018	73221	\$ 878.67
5307	0472172550101014	ECLIPSE MEDICAL IMAGING PC	11/29/2018	NF-3 Bill Form / HCFA 1500 Form	10/21/2018	73221	\$ 878.67
5308	0582567680101015	ECLIPSE MEDICAL IMAGING PC	11/29/2018	NF-3 Bill Form / HCFA 1500 Form	10/19/2018	73221	\$ 878.67
5309	0624241100101027	ECLIPSE MEDICAL IMAGING PC	11/29/2018	NF-3 Bill Form / HCFA 1500 Form	10/18/2018	73721	\$ 878.67
5310	0585521960101044	ECLIPSE MEDICAL IMAGING PC	11/29/2018	NF-3 Bill Form / HCFA 1500 Form	10/17/2018	73221	\$ 878.67
5311	0321099470101027	ECLIPSE MEDICAL IMAGING PC	11/29/2018	NF-3 Bill Form / HCFA 1500 Form	10/15/2018	72125	\$ 581.90
5312	0472172550101014	ECLIPSE MEDICAL IMAGING PC	11/29/2018	NF-3 Bill Form / HCFA 1500 Form	10/16/2018	73721	\$ 878.67
5313	0265211080101028	ECLIPSE MEDICAL IMAGING PC	11/29/2018	NF-3 Bill Form / HCFA 1500 Form	10/19/2018	73721	\$ 878.67
5314	0609019050101018	ECLIPSE MEDICAL IMAGING PC	11/29/2018	NF-3 Bill Form / HCFA 1500 Form	10/16/2018	72148	\$ 912.00
5315	0609019050101018	ECLIPSE MEDICAL IMAGING PC	11/29/2018	NF-3 Bill Form / HCFA 1500 Form	10/16/2018	72141	\$ 659.79
5316	0518745610101045	ECLIPSE MEDICAL IMAGING PC	11/29/2018	NF-3 Bill Form / HCFA 1500 Form	10/18/2018	73700	\$ 486.68
5317	0253459560101075	ECLIPSE MEDICAL IMAGING PC	11/29/2018	NF-3 Bill Form / HCFA 1500 Form	10/21/2018	72148	\$ 912.00
5318	0253459560101075	ECLIPSE MEDICAL IMAGING PC	11/29/2018	NF-3 Bill Form / HCFA 1500 Form	10/21/2018	73221	\$ 659.00
5319	0566607500101058	ECLIPSE MEDICAL IMAGING PC	11/29/2018	NF-3 Bill Form / HCFA 1500 Form	10/17/2018	73721	\$ 878.67
5320	0566607500101058	ECLIPSE MEDICAL IMAGING PC	11/29/2018	NF-3 Bill Form / HCFA 1500 Form	10/17/2018	73510	\$ 62.68

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Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
5321	0631456560101017	ECLIPSE MEDICAL IMAGING PC	12/3/2018	NF-3 Bill Form / HCFA 1500 Form	10/18/2018	73030	\$ 71.02
5322	0631456560101017	ECLIPSE MEDICAL IMAGING PC	12/3/2018	NF-3 Bill Form / HCFA 1500 Form	10/18/2018	72040	\$ 72.20
5323	0631456560101017	ECLIPSE MEDICAL IMAGING PC	12/3/2018	NF-3 Bill Form / HCFA 1500 Form	10/18/2018	72070	\$ 69.82
5324	0631456560101017	ECLIPSE MEDICAL IMAGING PC	12/3/2018	NF-3 Bill Form / HCFA 1500 Form	10/18/2018	72100	\$ 65.86
5325	0631456560101017	ECLIPSE MEDICAL IMAGING PC	12/3/2018	NF-3 Bill Form / HCFA 1500 Form	10/18/2018	73721	\$ 878.67
5326	0590678200101011	ECLIPSE MEDICAL IMAGING PC	12/3/2018	NF-3 Bill Form / HCFA 1500 Form	10/18/2018	72148	\$ 912.00
5327	0365020290101010	ECLIPSE MEDICAL IMAGING PC	12/3/2018	NF-3 Bill Form / HCFA 1500 Form	10/21/2018	73718	\$ 901.42
5328	0543234680101010	ECLIPSE MEDICAL IMAGING PC	12/3/2018	NF-3 Bill Form / HCFA 1500 Form	10/23/2018	73718	\$ 901.42
5329	0518745610101045	ECLIPSE MEDICAL IMAGING PC	12/3/2018	NF-3 Bill Form / HCFA 1500 Form	10/24/2018	72148	\$ 912.00
5330	0308294330101021	ECLIPSE MEDICAL IMAGING PC	12/3/2018	NF-3 Bill Form / HCFA 1500 Form	10/23/2018	73721	\$ 878.67
5331	0627570230101011	ECLIPSE MEDICAL IMAGING PC	12/3/2018	NF-3 Bill Form / HCFA 1500 Form	10/24/2018	73721	\$ 878.67
5332	0425249920101011	ECLIPSE MEDICAL IMAGING PC	12/3/2018	NF-3 Bill Form / HCFA 1500 Form	10/23/2018	72141	\$ 879.73
5333	0575009300101041	ECLIPSE MEDICAL IMAGING PC	12/3/2018	NF-3 Bill Form / HCFA 1500 Form	10/23/2018	72141	\$ 879.73
5334	0633411520101027	ECLIPSE MEDICAL IMAGING PC	12/3/2018	NF-3 Bill Form / HCFA 1500 Form	10/18/2018	72148	\$ 912.00
5335	0633411520101027	ECLIPSE MEDICAL IMAGING PC	12/3/2018	NF-3 Bill Form / HCFA 1500 Form	10/18/2018	72141	\$ 659.79
5336	0518745610101045	ECLIPSE MEDICAL IMAGING PC	12/3/2018	NF-3 Bill Form / HCFA 1500 Form	10/18/2018	72141	\$ 879.73
5337	0456896800101032	ECLIPSE MEDICAL IMAGING PC	12/3/2018	NF-3 Bill Form / HCFA 1500 Form	10/16/2018	72148	\$ 912.00
5338	0456896800101032	ECLIPSE MEDICAL IMAGING PC	12/3/2018	NF-3 Bill Form / HCFA 1500 Form	10/16/2018	72141	\$ 659.79
5339	0635589450101014	ECLIPSE MEDICAL IMAGING PC	12/3/2018	NF-3 Bill Form / HCFA 1500 Form	10/15/2018	72148	\$ 912.00
5340	0635589450101014	ECLIPSE MEDICAL IMAGING PC	12/3/2018	NF-3 Bill Form / HCFA 1500 Form	10/15/2018	72070	\$ 69.82
5341	0635589450101014	ECLIPSE MEDICAL IMAGING PC	12/3/2018	NF-3 Bill Form / HCFA 1500 Form	10/15/2018	72040	\$ 72.20
5342	0583360120101038	ECLIPSE MEDICAL IMAGING PC	12/4/2018	NF-3 Bill Form / HCFA 1500 Form	10/21/2018	72148	\$ 912.00
5343	0583360120101038	ECLIPSE MEDICAL IMAGING PC	12/4/2018	NF-3 Bill Form / HCFA 1500 Form	10/21/2018	72141	\$ 659.79
5344	0518745610101045	ECLIPSE MEDICAL IMAGING PC	12/4/2018	NF-3 Bill Form / HCFA 1500 Form	10/22/2018	72125	\$ 581.90
5345	0518745610101045	ECLIPSE MEDICAL IMAGING PC	12/4/2018	NF-3 Bill Form / HCFA 1500 Form	10/22/2018	73700	\$ 365.01
5346	0566607500101058	ECLIPSE MEDICAL IMAGING PC	12/7/2018	NF-3 Bill Form / HCFA 1500 Form	10/17/2018	72148	\$ 912.00
5347	0566607500101058	ECLIPSE MEDICAL IMAGING PC	12/7/2018	NF-3 Bill Form / HCFA 1500 Form	10/17/2018	73030	\$ 71.02
5348	0566607500101058	ECLIPSE MEDICAL IMAGING PC	12/7/2018	NF-3 Bill Form / HCFA 1500 Form	10/17/2018	72100	\$ 65.86
5349	0566607500101058	ECLIPSE MEDICAL IMAGING PC	12/7/2018	NF-3 Bill Form / HCFA 1500 Form	10/17/2018	73030	\$ 71.02
5350	0518745610101045	ECLIPSE MEDICAL IMAGING PC	12/10/2018	NF-3 Bill Form / HCFA 1500 Form	10/26/2018	72131	\$ 581.90
5351	0510664220101014	ECLIPSE MEDICAL IMAGING PC	12/10/2018	NF-3 Bill Form / HCFA 1500 Form	10/26/2018	73221	\$ 878.67
5352	0590515690101020	ECLIPSE MEDICAL IMAGING PC	12/10/2018	NF-3 Bill Form / HCFA 1500 Form	7/18/2018	73721	\$ 878.67
5353	0518745610101045	ECLIPSE MEDICAL IMAGING PC	12/11/2018	NF-3 Bill Form / HCFA 1500 Form	10/26/2018	72146	\$ 959.61
5354	0631456560101017	ECLIPSE MEDICAL IMAGING PC	12/12/2018	NF-3 Bill Form / HCFA 1500 Form	10/30/2018	72148	\$ 912.00
5355	0321099470101027	ECLIPSE MEDICAL IMAGING PC	12/12/2018	NF-3 Bill Form / HCFA 1500 Form	10/29/2018	72148	\$ 912.00
5356	0624241100101027	ECLIPSE MEDICAL IMAGING PC	12/14/2018	NF-3 Bill Form / HCFA 1500 Form	11/1/2018	72141	\$ 879.73
5357	0581963280101037	ECLIPSE MEDICAL IMAGING PC	12/14/2018	NF-3 Bill Form / HCFA 1500 Form	11/2/2018	72148	\$ 912.00
5358	0581963280101037	ECLIPSE MEDICAL IMAGING PC	12/14/2018	NF-3 Bill Form / HCFA 1500 Form	11/2/2018	72070	\$ 69.82
5359	0587522680101015	ECLIPSE MEDICAL IMAGING PC	12/14/2018	NF-3 Bill Form / HCFA 1500 Form	11/2/2018	72040	\$ 96.27
5360	0587522680101015	ECLIPSE MEDICAL IMAGING PC	12/14/2018	NF-3 Bill Form / HCFA 1500 Form	11/2/2018	72100	\$ 65.86
5361	0510664220101014	ECLIPSE MEDICAL IMAGING PC	12/17/2018	NF-3 Bill Form / HCFA 1500 Form	10/31/2018	72141	\$ 879.73
5362	0581963280101037	ECLIPSE MEDICAL IMAGING PC	12/17/2018	NF-3 Bill Form / HCFA 1500 Form	11/2/2018	72141	\$ 879.73
5363	0581963280101037	ECLIPSE MEDICAL IMAGING PC	12/17/2018	NF-3 Bill Form / HCFA 1500 Form	11/2/2018	73070	\$ 52.77
5364	0449311610101032	ECLIPSE MEDICAL IMAGING PC	12/17/2018	NF-3 Bill Form / HCFA 1500 Form	11/5/2018	73721	\$ 878.67
5365	056229580101019	ECLIPSE MEDICAL IMAGING PC	12/17/2018	NF-3 Bill Form / HCFA 1500 Form	11/4/2018	73221	\$ 878.67
5366	0456896800101032	ECLIPSE MEDICAL IMAGING PC	12/17/2018	NF-3 Bill Form / HCFA 1500 Form	10/30/2018	73721	\$ 878.67
5367	0474201290101022	ECLIPSE MEDICAL IMAGING PC	12/17/2018	NF-3 Bill Form / HCFA 1500 Form	11/5/2018	73721	\$ 878.67
5368	0308294330101021	ECLIPSE MEDICAL IMAGING PC	12/17/2018	NF-3 Bill Form / HCFA 1500 Form	10/30/2018	70450	\$ 455.47
5369	0321099470101027	ECLIPSE MEDICAL IMAGING PC	12/17/2018	NF-3 Bill Form / HCFA 1500 Form	10/29/2018	72131	\$ 581.90
5370	0566812100101025	ECLIPSE MEDICAL IMAGING PC	12/18/2018	NF-3 Bill Form / HCFA 1500 Form	11/6/2018	72148	\$ 912.00
5371	0566812100101025	ECLIPSE MEDICAL IMAGING PC	12/18/2018	NF-3 Bill Form / HCFA 1500 Form	11/6/2018	72141	\$ 659.79
5372	0102672580101023	ECLIPSE MEDICAL IMAGING PC	12/26/2018	NF-3 Bill Form / HCFA 1500 Form	11/7/2018	73030	\$ 71.02
5373	0102672580101023	ECLIPSE MEDICAL IMAGING PC	12/26/2018	NF-3 Bill Form / HCFA 1500 Form	11/7/2018	72100	\$ 65.86
5374	0102672580101023	ECLIPSE MEDICAL IMAGING PC	12/26/2018	NF-3 Bill Form / HCFA 1500 Form	11/7/2018	73721	\$ 878.67
5375	0102672580101023	ECLIPSE MEDICAL IMAGING PC	12/26/2018	NF-3 Bill Form / HCFA 1500 Form	11/7/2018	72040	\$ 72.20
5376	0102672580101023	ECLIPSE MEDICAL IMAGING PC	12/26/2018	NF-3 Bill Form / HCFA 1500 Form	11/7/2018	73560	\$ 55.54
5377	0102672580101023	ECLIPSE MEDICAL IMAGING PC	12/26/2018	NF-3 Bill Form / HCFA 1500 Form	11/7/2018	73100	\$ 46.42
5378	0540192020101046	ECLIPSE MEDICAL IMAGING PC	12/26/2018	NF-3 Bill Form / HCFA 1500 Form	11/11/2018	72141	\$ 659.79
5379	0540192020101046	ECLIPSE MEDICAL IMAGING PC	12/26/2018	NF-3 Bill Form / HCFA 1500 Form	11/11/2018	72148	\$ 912.00
5380	0553741590101010	ECLIPSE MEDICAL IMAGING PC	12/31/2018	NF-3 Bill Form / HCFA 1500 Form	11/12/2018	72141	\$ 879.73
5381	0631456560101017	ECLIPSE MEDICAL IMAGING PC	12/31/2018	NF-3 Bill Form / HCFA 1500 Form	11/7/2018	73221	\$ 878.67
5382	0552872440101024	ECLIPSE MEDICAL IMAGING PC	12/31/2018	NF-3 Bill Form / HCFA 1500 Form	11/8/2018	73221	\$ 878.67
5383	0408595000101144	ECLIPSE MEDICAL IMAGING PC	11/1/2018	NF-3 Bill Form / HCFA 1500 Form	9/18/2018	72148	\$ 912.00
5384	0308294330101021	ECLIPSE MEDICAL IMAGING PC	12/31/2018	NF-3 Bill Form / HCFA 1500 Form	11/13/2018	72125	\$ 581.90
5385	0308294330101021	ECLIPSE MEDICAL IMAGING PC	12/31/2018	NF-3 Bill Form / HCFA 1500 Form	11/13/2018	72131	\$ 436.42
5386	0581963280101037	ECLIPSE MEDICAL IMAGING PC	12/31/2018	NF-3 Bill Form / HCFA 1500 Form	11/7/2018	72148	\$ 912.00
5387	0581963280101037	ECLIPSE MEDICAL IMAGING PC	12/31/2018	NF-3 Bill Form / HCFA 1500 Form	11/7/2018	72141	\$ 879.73
5388	0391816420101020	ECLIPSE MEDICAL IMAGING PC	12/31/2018	NF-3 Bill Form / HCFA 1500 Form	11/9/2018	72141	\$ 659.79
5389	0391816420101020	ECLIPSE MEDICAL IMAGING PC	12/31/2018	NF-3 Bill Form / HCFA 1500 Form	11/9/2018	72148	\$ 912.00
5390	0474201290101022	ECLIPSE MEDICAL IMAGING PC	12/31/2018	NF-3 Bill Form / HCFA 1500 Form	11/7/2018	73721	\$ 878.67

Government Employees Insurance Company, et al v. Eclipse Medical Imaging, et al
Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
5391	0590515690101020	ECLIPSE MEDICAL IMAGING PC	12/31/2018	NF-3 Bill Form / HCFA 1500 Form	7/18/2018	73721	\$ 878.67
5392	0590515690101020	ECLIPSE MEDICAL IMAGING PC	12/27/2018	NF-3 Bill Form / HCFA 1500 Form	7/18/2018	73721	\$ 878.67
5393	0306099520101018	ECLIPSE MEDICAL IMAGING PC	12/31/2018	NF-3 Bill Form / HCFA 1500 Form	11/14/2018	72141	\$ 879.73
5394	0636340570101016	ECLIPSE MEDICAL IMAGING PC	12/31/2018	NF-3 Bill Form / HCFA 1500 Form	11/12/2018	73218	\$ 765.99
5395	0176056780101036	ECLIPSE MEDICAL IMAGING PC	12/31/2018	NF-3 Bill Form / HCFA 1500 Form	11/18/2018	70551	\$ 655.83
5396	0176056780101036	ECLIPSE MEDICAL IMAGING PC	12/31/2018	NF-3 Bill Form / HCFA 1500 Form	11/18/2018	73221	\$ 878.67
5397	0624241100101027	ECLIPSE MEDICAL IMAGING PC	12/31/2018	NF-3 Bill Form / HCFA 1500 Form	11/15/2018	72148	\$ 912.00
5398	0603859220101034	ECLIPSE MEDICAL IMAGING PC	12/31/2018	NF-3 Bill Form / HCFA 1500 Form	11/20/2018	73221	\$ 878.67
5399	0552872440101024	ECLIPSE MEDICAL IMAGING PC	12/31/2018	NF-3 Bill Form / HCFA 1500 Form	11/25/2018	73721	\$ 878.67
5400	0636340570101016	ECLIPSE MEDICAL IMAGING PC	12/31/2018	NF-3 Bill Form / HCFA 1500 Form	11/25/2018	72148	\$ 912.00
5401	0636340570101016	ECLIPSE MEDICAL IMAGING PC	12/31/2018	NF-3 Bill Form / HCFA 1500 Form	11/25/2018	72141	\$ 659.79
5402	0452143010101021	ECLIPSE MEDICAL IMAGING PC	12/31/2018	NF-3 Bill Form / HCFA 1500 Form	11/19/2018	73721	\$ 878.67
5403	0452143010101021	ECLIPSE MEDICAL IMAGING PC	12/31/2018	NF-3 Bill Form / HCFA 1500 Form	11/19/2018	73221	\$ 659.00
5404	0452143010101021	ECLIPSE MEDICAL IMAGING PC	12/31/2018	NF-3 Bill Form / HCFA 1500 Form	11/26/2018	72141	\$ 659.79
5405	0452143010101021	ECLIPSE MEDICAL IMAGING PC	12/31/2018	NF-3 Bill Form / HCFA 1500 Form	11/26/2018	72148	\$ 912.00
5406	0602775040101015	ECLIPSE MEDICAL IMAGING PC	12/31/2018	NF-3 Bill Form / HCFA 1500 Form	11/19/2018	73721	\$ 878.67
5407	0575009300101041	ECLIPSE MEDICAL IMAGING PC	12/31/2018	NF-3 Bill Form / HCFA 1500 Form	11/19/2018	72148	\$ 912.00
5408	0534547460101046	ECLIPSE MEDICAL IMAGING PC	12/31/2018	NF-3 Bill Form / HCFA 1500 Form	11/23/2018	73221	\$ 878.67
5409	0493667310101076	ECLIPSE MEDICAL IMAGING PC	12/31/2018	NF-3 Bill Form / HCFA 1500 Form	9/14/2018	73560	\$ 55.54
5410	0493667310101076	ECLIPSE MEDICAL IMAGING PC	12/31/2018	NF-3 Bill Form / HCFA 1500 Form	9/14/2018	72141	\$ 879.73
5411	0510664220101014	ECLIPSE MEDICAL IMAGING PC	12/31/2018	NF-3 Bill Form / HCFA 1500 Form	11/16/2018	72148	\$ 912.00
5412	0585521960101044	ECLIPSE MEDICAL IMAGING PC	12/31/2018	NF-3 Bill Form / HCFA 1500 Form	11/13/2018	72141	\$ 659.79
5413	0585521960101044	ECLIPSE MEDICAL IMAGING PC	12/31/2018	NF-3 Bill Form / HCFA 1500 Form	11/13/2018	72148	\$ 912.00
5414	0589672620101027	ECLIPSE MEDICAL IMAGING PC	12/31/2018	NF-3 Bill Form / HCFA 1500 Form	11/27/2018	73218	\$ 765.99
5415	0313753160101032	ECLIPSE MEDICAL IMAGING PC	12/31/2018	NF-3 Bill Form / HCFA 1500 Form	11/21/2018	73718	\$ 901.42
5416	0313753160101032	ECLIPSE MEDICAL IMAGING PC	12/31/2018	NF-3 Bill Form / HCFA 1500 Form	11/21/2018	73221	\$ 659.00
5417	0320266780101051	ECLIPSE MEDICAL IMAGING PC	12/31/2018	NF-3 Bill Form / HCFA 1500 Form	11/23/2018	73221	\$ 878.67
5418	0623826780101015	ECLIPSE MEDICAL IMAGING PC	12/31/2018	NF-3 Bill Form / HCFA 1500 Form	11/13/2018	73070	\$ 52.77
5419	0623826780101015	ECLIPSE MEDICAL IMAGING PC	12/31/2018	NF-3 Bill Form / HCFA 1500 Form	11/13/2018	72141	\$ 879.73
5420	0491003930101035	ECLIPSE MEDICAL IMAGING PC	12/31/2018	NF-3 Bill Form / HCFA 1500 Form	11/27/2018	73721	\$ 878.67
5421	0641869080101010	ECLIPSE MEDICAL IMAGING PC	1/7/2019	NF-3 Bill Form / HCFA 1500 Form	11/29/2018	73721	\$ 659.00
5422	0641869080101010	ECLIPSE MEDICAL IMAGING PC	1/7/2019	NF-3 Bill Form / HCFA 1500 Form	11/29/2018	72148	\$ 912.00
5423	0543192360101049	ECLIPSE MEDICAL IMAGING PC	1/7/2019	NF-3 Bill Form / HCFA 1500 Form	11/30/2018	72125	\$ 581.90
5424	0461647460101058	ECLIPSE MEDICAL IMAGING PC	1/8/2019	NF-3 Bill Form / HCFA 1500 Form	11/27/2018	73560	\$ 55.54
5425	0461647460101058	ECLIPSE MEDICAL IMAGING PC	1/8/2019	NF-3 Bill Form / HCFA 1500 Form	11/27/2018	72100	\$ 65.86
5426	0461647460101058	ECLIPSE MEDICAL IMAGING PC	1/8/2019	NF-3 Bill Form / HCFA 1500 Form	11/27/2018	72040	\$ 96.27
5427	0605046900101017	ECLIPSE MEDICAL IMAGING PC	1/8/2019	NF-3 Bill Form / HCFA 1500 Form	11/30/2018	72148	\$ 912.00
5428	0605046900101017	ECLIPSE MEDICAL IMAGING PC	1/8/2019	NF-3 Bill Form / HCFA 1500 Form	11/30/2018	72141	\$ 659.79
5429	0331193700101176	ECLIPSE MEDICAL IMAGING PC	1/8/2019	NF-3 Bill Form / HCFA 1500 Form	11/29/2018	73721	\$ 878.67
5430	0348224470101053	ECLIPSE MEDICAL IMAGING PC	1/14/2019	NF-3 Bill Form / HCFA 1500 Form	11/30/2018	72141	\$ 879.73
5431	0629423660101010	ECLIPSE MEDICAL IMAGING PC	1/14/2019	NF-3 Bill Form / HCFA 1500 Form	12/3/2018	72141	\$ 659.79
5432	0629423660101010	ECLIPSE MEDICAL IMAGING PC	1/14/2019	NF-3 Bill Form / HCFA 1500 Form	12/3/2018	72148	\$ 912.00
5433	0106526700101105	ECLIPSE MEDICAL IMAGING PC	1/14/2019	NF-3 Bill Form / HCFA 1500 Form	12/2/2018	73721	\$ 878.67
5434	0587522680101015	ECLIPSE MEDICAL IMAGING PC	1/14/2019	NF-3 Bill Form / HCFA 1500 Form	12/2/2018	72148	\$ 912.00
5435	0614995790101017	ECLIPSE MEDICAL IMAGING PC	1/17/2019	NF-3 Bill Form / HCFA 1500 Form	12/4/2018	72146	\$ 959.61
5436	0603859220101034	ECLIPSE MEDICAL IMAGING PC	1/22/2019	NF-3 Bill Form / HCFA 1500 Form	12/10/2018	72141	\$ 879.73
5437	0505651000101030	ECLIPSE MEDICAL IMAGING PC	1/22/2019	NF-3 Bill Form / HCFA 1500 Form	12/7/2018	73721	\$ 878.67
5438	0611351800101014	ECLIPSE MEDICAL IMAGING PC	1/22/2019	NF-3 Bill Form / HCFA 1500 Form	12/10/2018	72148	\$ 912.00
5439	0603859220101034	ECLIPSE MEDICAL IMAGING PC	1/22/2019	NF-3 Bill Form / HCFA 1500 Form	12/6/2018	72141	\$ 879.73
5440	0414169020101054	ECLIPSE MEDICAL IMAGING PC	1/22/2019	NF-3 Bill Form / HCFA 1500 Form	9/23/2018	73221	\$ 878.67
5441	0424201850101017	ECLIPSE MEDICAL IMAGING PC	1/22/2019	NF-3 Bill Form / HCFA 1500 Form	12/5/2018	72100	\$ 65.86
5442	0424201850101017	ECLIPSE MEDICAL IMAGING PC	1/22/2019	NF-3 Bill Form / HCFA 1500 Form	12/5/2018	73100	\$ 46.42
5443	0424201850101017	ECLIPSE MEDICAL IMAGING PC	1/22/2019	NF-3 Bill Form / HCFA 1500 Form	12/5/2018	72070	\$ 69.82
5444	0424201850101017	ECLIPSE MEDICAL IMAGING PC	1/22/2019	NF-3 Bill Form / HCFA 1500 Form	12/5/2018	73560	\$ 55.54
5445	0424201850101017	ECLIPSE MEDICAL IMAGING PC	1/22/2019	NF-3 Bill Form / HCFA 1500 Form	12/5/2018	72040	\$ 96.27
5446	0424201850101017	ECLIPSE MEDICAL IMAGING PC	1/22/2019	NF-3 Bill Form / HCFA 1500 Form	12/5/2018	73100	\$ 46.42
5447	0424201850101017	ECLIPSE MEDICAL IMAGING PC	1/22/2019	NF-3 Bill Form / HCFA 1500 Form	12/5/2018	73560	\$ 55.54
5448	0424201850101017	ECLIPSE MEDICAL IMAGING PC	1/22/2019	NF-3 Bill Form / HCFA 1500 Form	12/5/2018	73221	\$ 878.67
5449	0424201850101017	ECLIPSE MEDICAL IMAGING PC	1/22/2019	NF-3 Bill Form / HCFA 1500 Form	12/5/2018	72040	\$ 72.20
5450	0424201850101017	ECLIPSE MEDICAL IMAGING PC	1/22/2019	NF-3 Bill Form / HCFA 1500 Form	12/5/2018	72100	\$ 65.86
5451	0270758240101093	ECLIPSE MEDICAL IMAGING PC	1/22/2019	NF-3 Bill Form / HCFA 1500 Form	12/7/2018	73721	\$ 878.67
5452	0270758240101093	ECLIPSE MEDICAL IMAGING PC	1/22/2019	NF-3 Bill Form / HCFA 1500 Form	12/3/2018	73221	\$ 878.67
5453	0102672580101023	ECLIPSE MEDICAL IMAGING PC	1/24/2019	NF-3 Bill Form / HCFA 1500 Form	12/10/2018	72148	\$ 912.00
5454	0102672580101023	ECLIPSE MEDICAL IMAGING PC	1/24/2019	NF-3 Bill Form / HCFA 1500 Form	12/10/2018	73221	\$ 659.00
5455	0176894840101046	ECLIPSE MEDICAL IMAGING PC	1/24/2019	NF-3 Bill Form / HCFA 1500 Form	12/10/2018	73700	\$ 486.68
5456	0176894840101046	ECLIPSE MEDICAL IMAGING PC	1/24/2019	NF-3 Bill Form / HCFA 1500 Form	12/10/2018	70450	\$ 341.60
5457	0456896800101032	ECLIPSE MEDICAL IMAGING PC	1/24/2019	NF-3 Bill Form / HCFA 1500 Form	12/10/2018	73221	\$ 878.67
5458	0318790600101144	ECLIPSE MEDICAL IMAGING PC	1/25/2019	NF-3 Bill Form / HCFA 1500 Form	12/13/2018	73660	\$ 59.24
5459	0640351180101019	ECLIPSE MEDICAL IMAGING PC	1/25/2019	NF-3 Bill Form / HCFA 1500 Form	12/12/2018	73221	\$ 878.67
5460	0640351180101019	ECLIPSE MEDICAL IMAGING PC	1/25/2019	NF-3 Bill Form / HCFA 1500 Form	12/12/2018	73721	\$ 659.00

Government Employees Insurance Company, et al v. Eclipse Medical Imaging, et al
Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
5461	0434864210101023	ECLIPSE MEDICAL IMAGING PC	1/25/2019	NF-3 Bill Form / HCFA 1500 Form	12/13/2018	73721	\$ 878.67
5462	0568399360101026	ECLIPSE MEDICAL IMAGING PC	1/28/2019	NF-3 Bill Form / HCFA 1500 Form	12/16/2018	73721	\$ 878.67
5463	0424201850101017	ECLIPSE MEDICAL IMAGING PC	1/28/2019	NF-3 Bill Form / HCFA 1500 Form	12/12/2018	72141	\$ 879.73
5464	0424201850101017	ECLIPSE MEDICAL IMAGING PC	1/28/2019	NF-3 Bill Form / HCFA 1500 Form	12/12/2018	73721	\$ 659.00
5465	0621437830101013	ECLIPSE MEDICAL IMAGING PC	1/28/2019	NF-3 Bill Form / HCFA 1500 Form	12/11/2018	72141	\$ 659.79
5466	0621437830101013	ECLIPSE MEDICAL IMAGING PC	1/28/2019	NF-3 Bill Form / HCFA 1500 Form	12/11/2018	72148	\$ 912.00
5467	0493667310101076	ECLIPSE MEDICAL IMAGING PC	1/28/2019	NF-3 Bill Form / HCFA 1500 Form	12/6/2018	73721	\$ 878.67
5468	0454641340101072	ECLIPSE MEDICAL IMAGING PC	1/28/2019	NF-3 Bill Form / HCFA 1500 Form	12/13/2018	73221	\$ 878.67
5469	0622474670101018	ECLIPSE MEDICAL IMAGING PC	1/28/2019	NF-3 Bill Form / HCFA 1500 Form	12/13/2018	73721	\$ 878.67
5470	0640351180101019	ECLIPSE MEDICAL IMAGING PC	1/30/2019	NF-3 Bill Form / HCFA 1500 Form	12/14/2018	73721	\$ 878.67
5471	0640351180101019	ECLIPSE MEDICAL IMAGING PC	1/30/2019	NF-3 Bill Form / HCFA 1500 Form	12/14/2018	73221	\$ 659.00
5472	0568399360101026	ECLIPSE MEDICAL IMAGING PC	1/30/2019	NF-3 Bill Form / HCFA 1500 Form	12/14/2018	73721	\$ 878.67
5473	0461647460101058	ECLIPSE MEDICAL IMAGING PC	1/31/2019	NF-3 Bill Form / HCFA 1500 Form	12/17/2018	72148	\$ 912.00
5474	0461647460101058	ECLIPSE MEDICAL IMAGING PC	1/31/2019	NF-3 Bill Form / HCFA 1500 Form	12/17/2018	73721	\$ 659.00
5475	0560784690101010	ECLIPSE MEDICAL IMAGING PC	1/31/2019	NF-3 Bill Form / HCFA 1500 Form	12/18/2018	73721	\$ 659.00
5476	0560784690101010	ECLIPSE MEDICAL IMAGING PC	1/31/2019	NF-3 Bill Form / HCFA 1500 Form	12/18/2018	73721	\$ 878.67
5477	0587522680101015	ECLIPSE MEDICAL IMAGING PC	1/31/2019	NF-3 Bill Form / HCFA 1500 Form	12/17/2018	72141	\$ 879.73
5478	0437100700101091	ECLIPSE MEDICAL IMAGING PC	1/31/2019	NF-3 Bill Form / HCFA 1500 Form	12/18/2018	72148	\$ 912.00
5479	0627570230101011	ECLIPSE MEDICAL IMAGING PC	1/31/2019	NF-3 Bill Form / HCFA 1500 Form	12/18/2018	72141	\$ 879.73
5480	0424201850101017	ECLIPSE MEDICAL IMAGING PC	1/31/2019	NF-3 Bill Form / HCFA 1500 Form	12/19/2018	72148	\$ 912.00
5481	0335802050101075	ECLIPSE MEDICAL IMAGING PC	1/31/2019	NF-3 Bill Form / HCFA 1500 Form	12/17/2018	73721	\$ 878.67
5482	0579802600101034	ECLIPSE MEDICAL IMAGING PC	1/31/2019	NF-3 Bill Form / HCFA 1500 Form	12/19/2018	72148	\$ 912.00
5483	0424201850101017	ECLIPSE MEDICAL IMAGING PC	1/31/2019	NF-3 Bill Form / HCFA 1500 Form	12/19/2018	72141	\$ 879.73
5484	0461647460101058	ECLIPSE MEDICAL IMAGING PC	2/1/2019	NF-3 Bill Form / HCFA 1500 Form	12/19/2018	72146	\$ 959.61
5485	0621437830101013	ECLIPSE MEDICAL IMAGING PC	2/1/2019	NF-3 Bill Form / HCFA 1500 Form	12/19/2018	73221	\$ 659.00
5486	0621437830101013	ECLIPSE MEDICAL IMAGING PC	2/1/2019	NF-3 Bill Form / HCFA 1500 Form	12/19/2018	73721	\$ 878.67
5487	0587522680101015	ECLIPSE MEDICAL IMAGING PC	2/1/2019	NF-3 Bill Form / HCFA 1500 Form	12/14/2018	73221	\$ 878.67
5488	0454641340101072	ECLIPSE MEDICAL IMAGING PC	2/4/2019	NF-3 Bill Form / HCFA 1500 Form	12/17/2018	72141	\$ 659.79
5489	0454641340101072	ECLIPSE MEDICAL IMAGING PC	2/4/2019	NF-3 Bill Form / HCFA 1500 Form	12/17/2018	72148	\$ 912.00
5490	0448236830101044	ECLIPSE MEDICAL IMAGING PC	2/4/2019	NF-3 Bill Form / HCFA 1500 Form	12/21/2018	72148	\$ 912.00
5491	0535744750101013	ECLIPSE MEDICAL IMAGING PC	2/4/2019	NF-3 Bill Form / HCFA 1500 Form	12/20/2018	73218	\$ 574.49
5492	0535744750101013	ECLIPSE MEDICAL IMAGING PC	2/4/2019	NF-3 Bill Form / HCFA 1500 Form	12/20/2018	73221	\$ 878.67
5493	0424201850101017	ECLIPSE MEDICAL IMAGING PC	2/4/2019	NF-3 Bill Form / HCFA 1500 Form	12/23/2018	72148	\$ 912.00
5494	0441468480101084	ECLIPSE MEDICAL IMAGING PC	2/4/2019	NF-3 Bill Form / HCFA 1500 Form	12/20/2018	72148	\$ 912.00
5495	0441468480101084	ECLIPSE MEDICAL IMAGING PC	2/4/2019	NF-3 Bill Form / HCFA 1500 Form	12/20/2018	73221	\$ 659.00
5496	0603859220101034	ECLIPSE MEDICAL IMAGING PC	2/4/2019	NF-3 Bill Form / HCFA 1500 Form	12/24/2018	72148	\$ 912.00
5497	0467436740101060	ECLIPSE MEDICAL IMAGING PC	2/4/2019	NF-3 Bill Form / HCFA 1500 Form	12/23/2018	73721	\$ 878.67
5498	0568399360101026	ECLIPSE MEDICAL IMAGING PC	2/4/2019	NF-3 Bill Form / HCFA 1500 Form	12/23/2018	72141	\$ 879.73
5499	0602775040101015	ECLIPSE MEDICAL IMAGING PC	2/4/2019	NF-3 Bill Form / HCFA 1500 Form	12/14/2018	72148	\$ 912.00
5500	0505651000101030	ECLIPSE MEDICAL IMAGING PC	2/6/2019	NF-3 Bill Form / HCFA 1500 Form	12/21/2018	72141	\$ 879.73
5501	0587522680101015	ECLIPSE MEDICAL IMAGING PC	2/7/2019	NF-3 Bill Form / HCFA 1500 Form	12/20/2018	73221	\$ 878.67
5502	0176894840101046	ECLIPSE MEDICAL IMAGING PC	2/11/2019	NF-3 Bill Form / HCFA 1500 Form	12/28/2018	72141	\$ 879.73
5503	0454641340101072	ECLIPSE MEDICAL IMAGING PC	2/11/2019	NF-3 Bill Form / HCFA 1500 Form	12/26/2018	72146	\$ 959.61
5504	0176894840101046	ECLIPSE MEDICAL IMAGING PC	2/11/2019	NF-3 Bill Form / HCFA 1500 Form	12/30/2018	72148	\$ 912.00
5505	0176894840101046	ECLIPSE MEDICAL IMAGING PC	2/11/2019	NF-3 Bill Form / HCFA 1500 Form	12/26/2018	72131	\$ 436.42
5506	0176894840101046	ECLIPSE MEDICAL IMAGING PC	2/11/2019	NF-3 Bill Form / HCFA 1500 Form	12/26/2018	72125	\$ 581.90
5507	0493667310101076	ECLIPSE MEDICAL IMAGING PC	2/11/2019	NF-3 Bill Form / HCFA 1500 Form	9/27/2018	72148	\$ 912.00
5508	0454641340101072	ECLIPSE MEDICAL IMAGING PC	2/11/2019	NF-3 Bill Form / HCFA 1500 Form	12/27/2018	72141	\$ 659.79
5509	0454641340101072	ECLIPSE MEDICAL IMAGING PC	2/11/2019	NF-3 Bill Form / HCFA 1500 Form	12/27/2018	72148	\$ 912.00
5510	0171148120101043	ECLIPSE MEDICAL IMAGING PC	2/11/2019	NF-3 Bill Form / HCFA 1500 Form	12/27/2018	72141	\$ 659.79
5511	0171148120101043	ECLIPSE MEDICAL IMAGING PC	2/11/2019	NF-3 Bill Form / HCFA 1500 Form	12/27/2018	72148	\$ 912.00
5512	0270758240101093	ECLIPSE MEDICAL IMAGING PC	2/11/2019	NF-3 Bill Form / HCFA 1500 Form	12/28/2018	72141	\$ 659.79
5513	0270758240101093	ECLIPSE MEDICAL IMAGING PC	2/11/2019	NF-3 Bill Form / HCFA 1500 Form	12/28/2018	72148	\$ 912.00
5514	0535744750101013	ECLIPSE MEDICAL IMAGING PC	2/14/2019	NF-3 Bill Form / HCFA 1500 Form	1/3/2019	72141	\$ 659.79
5515	0535744750101013	ECLIPSE MEDICAL IMAGING PC	2/14/2019	NF-3 Bill Form / HCFA 1500 Form	1/3/2019	72148	\$ 912.00
5516	0631456560101017	ECLIPSE MEDICAL IMAGING PC	2/14/2019	NF-3 Bill Form / HCFA 1500 Form	1/4/2019	72141	\$ 879.73
5517	0234864780101041	ECLIPSE MEDICAL IMAGING PC	2/14/2019	NF-3 Bill Form / HCFA 1500 Form	1/4/2019	72148	\$ 912.00
5518	0234864780101041	ECLIPSE MEDICAL IMAGING PC	2/14/2019	NF-3 Bill Form / HCFA 1500 Form	1/4/2019	72141	\$ 659.79
5519	0517900680101018	ECLIPSE MEDICAL IMAGING PC	2/14/2019	NF-3 Bill Form / HCFA 1500 Form	1/4/2019	73721	\$ 878.67
5520	0176894840101046	ECLIPSE MEDICAL IMAGING PC	2/18/2019	NF-3 Bill Form / HCFA 1500 Form	1/3/2019	73221	\$ 878.67
5521	0176894840101046	ECLIPSE MEDICAL IMAGING PC	2/18/2019	NF-3 Bill Form / HCFA 1500 Form	1/3/2019	74176	\$ 280.10
5522	0401511360101092	ECLIPSE MEDICAL IMAGING PC	2/18/2019	NF-3 Bill Form / HCFA 1500 Form	1/6/2019	72141	\$ 879.73
5523	0622474670101018	ECLIPSE MEDICAL IMAGING PC	2/18/2019	NF-3 Bill Form / HCFA 1500 Form	1/7/2019	72148	\$ 912.00
5524	0300980140101098	ECLIPSE MEDICAL IMAGING PC	2/22/2019	NF-3 Bill Form / HCFA 1500 Form	1/13/2019	73721	\$ 878.67
5525	0300980140101098	ECLIPSE MEDICAL IMAGING PC	2/22/2019	NF-3 Bill Form / HCFA 1500 Form	1/11/2019	73721	\$ 659.00
5526	0300980140101098	ECLIPSE MEDICAL IMAGING PC	2/22/2019	NF-3 Bill Form / HCFA 1500 Form	1/11/2019	73718	\$ 901.42
5527	0629961510101011	ECLIPSE MEDICAL IMAGING PC	2/22/2019	NF-3 Bill Form / HCFA 1500 Form	1/11/2019	72141	\$ 659.79
5528	0629961510101011	ECLIPSE MEDICAL IMAGING PC	2/22/2019	NF-3 Bill Form / HCFA 1500 Form	1/11/2019	72148	\$ 912.00
5529	0505651000101030	ECLIPSE MEDICAL IMAGING PC	2/22/2019	NF-3 Bill Form / HCFA 1500 Form	1/10/2019	72148	\$ 912.00
5530	0401511360101092	ECLIPSE MEDICAL IMAGING PC	2/22/2019	NF-3 Bill Form / HCFA 1500 Form	1/13/2019	72148	\$ 912.00

Government Employees Insurance Company, et al v. Eclipse Medical Imaging, et al
Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
5531	0642791980101016	ECLIPSE MEDICAL IMAGING PC	2/22/2019	NF-3 Bill Form / HCFA 1500 Form	1/9/2019	73721	\$ 878.67
5532	0348224470101053	ECLIPSE MEDICAL IMAGING PC	2/22/2019	NF-3 Bill Form / HCFA 1500 Form	1/11/2019	72148	\$ 912.00
5533	0298024690101093	ECLIPSE MEDICAL IMAGING PC	2/22/2019	NF-3 Bill Form / HCFA 1500 Form	1/11/2019	73200	\$ 486.68
5534	0165188770101024	ECLIPSE MEDICAL IMAGING PC	2/25/2019	NF-3 Bill Form / HCFA 1500 Form	1/15/2019	73218	\$ 765.99
5535	0622474670101018	ECLIPSE MEDICAL IMAGING PC	2/25/2019	NF-3 Bill Form / HCFA 1500 Form	1/14/2019	73721	\$ 878.67
5536	0621540290101025	ECLIPSE MEDICAL IMAGING PC	2/25/2019	NF-3 Bill Form / HCFA 1500 Form	1/15/2019	73721	\$ 878.67
5537	0640351180101019	ECLIPSE MEDICAL IMAGING PC	2/25/2019	NF-3 Bill Form / HCFA 1500 Form	1/14/2019	73221	\$ 659.00
5538	0640351180101019	ECLIPSE MEDICAL IMAGING PC	2/25/2019	NF-3 Bill Form / HCFA 1500 Form	1/14/2019	72148	\$ 912.00
5539	0622474670101018	ECLIPSE MEDICAL IMAGING PC	2/25/2019	NF-3 Bill Form / HCFA 1500 Form	1/14/2019	73721	\$ 878.67
5540	0632432690101010	ECLIPSE MEDICAL IMAGING PC	2/25/2019	NF-3 Bill Form / HCFA 1500 Form	1/14/2019	73721	\$ 878.67
5541	0629423660101010	ECLIPSE MEDICAL IMAGING PC	2/25/2019	NF-3 Bill Form / HCFA 1500 Form	1/14/2019	73221	\$ 878.67
5542	0629423660101010	ECLIPSE MEDICAL IMAGING PC	2/25/2019	NF-3 Bill Form / HCFA 1500 Form	1/14/2019	73721	\$ 659.00
5543	0467310720101046	ECLIPSE MEDICAL IMAGING PC	2/25/2019	NF-3 Bill Form / HCFA 1500 Form	1/14/2019	72148	\$ 912.00
5544	0467310720101046	ECLIPSE MEDICAL IMAGING PC	2/25/2019	NF-3 Bill Form / HCFA 1500 Form	1/14/2019	72141	\$ 659.79
5545	0641869080101010	ECLIPSE MEDICAL IMAGING PC	2/25/2019	NF-3 Bill Form / HCFA 1500 Form	1/15/2019	72100	\$ 65.86
5546	0641869080101010	ECLIPSE MEDICAL IMAGING PC	2/25/2019	NF-3 Bill Form / HCFA 1500 Form	1/15/2019	72141	\$ 879.73
5547	0641869080101010	ECLIPSE MEDICAL IMAGING PC	2/25/2019	NF-3 Bill Form / HCFA 1500 Form	1/15/2019	73560	\$ 55.54
5548	0641869080101010	ECLIPSE MEDICAL IMAGING PC	2/25/2019	NF-3 Bill Form / HCFA 1500 Form	1/15/2019	72040	\$ 72.20
5549	0557123720101036	ECLIPSE MEDICAL IMAGING PC	2/25/2019	NF-3 Bill Form / HCFA 1500 Form	6/5/2018	72148	\$ 912.00
5550	0517900680101018	ECLIPSE MEDICAL IMAGING PC	2/25/2019	NF-3 Bill Form / HCFA 1500 Form	1/10/2019	73221	\$ 878.67
5551	0453280830101028	ECLIPSE MEDICAL IMAGING PC	2/25/2019	NF-3 Bill Form / HCFA 1500 Form	1/11/2019	72141	\$ 659.79
5552	0453280830101028	ECLIPSE MEDICAL IMAGING PC	2/25/2019	NF-3 Bill Form / HCFA 1500 Form	1/11/2019	72148	\$ 912.00
5553	0165188770101024	ECLIPSE MEDICAL IMAGING PC	2/26/2019	NF-3 Bill Form / HCFA 1500 Form	1/14/2019	73221	\$ 878.67
5554	0603859220101034	ECLIPSE MEDICAL IMAGING PC	2/26/2019	NF-3 Bill Form / HCFA 1500 Form	1/9/2019	72148	\$ 912.00
5555	0638438270101027	ECLIPSE MEDICAL IMAGING PC	2/26/2019	NF-3 Bill Form / HCFA 1500 Form	1/14/2019	73721	\$ 878.67
5556	0568399360101026	ECLIPSE MEDICAL IMAGING PC	2/26/2019	NF-3 Bill Form / HCFA 1500 Form	1/11/2019	72148	\$ 912.00
5557	0349679780101029	ECLIPSE MEDICAL IMAGING PC	2/26/2019	NF-3 Bill Form / HCFA 1500 Form	1/9/2019	73721	\$ 878.67
5558	0349679780101029	ECLIPSE MEDICAL IMAGING PC	2/26/2019	NF-3 Bill Form / HCFA 1500 Form	1/9/2019	70486	\$ 361.43
5559	0349679780101029	ECLIPSE MEDICAL IMAGING PC	2/26/2019	NF-3 Bill Form / HCFA 1500 Form	1/9/2019	70450	\$ 341.60
5560	0144934160101116	ECLIPSE MEDICAL IMAGING PC	3/1/2019	NF-3 Bill Form / HCFA 1500 Form	1/16/2019	72148	\$ 912.00
5561	0144934160101116	ECLIPSE MEDICAL IMAGING PC	3/1/2019	NF-3 Bill Form / HCFA 1500 Form	1/16/2019	73221	\$ 659.00
5562	0144934160101116	ECLIPSE MEDICAL IMAGING PC	3/1/2019	NF-3 Bill Form / HCFA 1500 Form	1/16/2019	73120	\$ 47.61
5563	0144934160101116	ECLIPSE MEDICAL IMAGING PC	3/1/2019	NF-3 Bill Form / HCFA 1500 Form	1/16/2019	73560	\$ 55.54
5564	0124225860101033	ECLIPSE MEDICAL IMAGING PC	3/1/2019	NF-3 Bill Form / HCFA 1500 Form	1/16/2019	71100	\$ 88.87
5565	0567063610101019	ECLIPSE MEDICAL IMAGING PC	3/1/2019	NF-3 Bill Form / HCFA 1500 Form	1/16/2019	72100	\$ 65.86
5566	0567063610101019	ECLIPSE MEDICAL IMAGING PC	3/1/2019	NF-3 Bill Form / HCFA 1500 Form	1/16/2019	72040	\$ 96.27
5567	0640351180101019	ECLIPSE MEDICAL IMAGING PC	3/1/2019	NF-3 Bill Form / HCFA 1500 Form	1/18/2019	72148	\$ 912.00
5568	0640351180101019	ECLIPSE MEDICAL IMAGING PC	3/1/2019	NF-3 Bill Form / HCFA 1500 Form	1/18/2019	72141	\$ 659.79
5569	0467436740101060	ECLIPSE MEDICAL IMAGING PC	3/1/2019	NF-3 Bill Form / HCFA 1500 Form	1/18/2019	72148	\$ 912.00
5570	0467436740101060	ECLIPSE MEDICAL IMAGING PC	3/1/2019	NF-3 Bill Form / HCFA 1500 Form	1/18/2019	72141	\$ 659.79
5571	0639984380101018	ECLIPSE MEDICAL IMAGING PC	3/4/2019	NF-3 Bill Form / HCFA 1500 Form	1/20/2019	73721	\$ 878.67
5572	0467436740101060	ECLIPSE MEDICAL IMAGING PC	3/4/2019	NF-3 Bill Form / HCFA 1500 Form	1/20/2019	72148	\$ 912.00
5573	0510794050101014	ECLIPSE MEDICAL IMAGING PC	3/4/2019	NF-3 Bill Form / HCFA 1500 Form	1/20/2019	73721	\$ 878.67
5574	0124225860101033	ECLIPSE MEDICAL IMAGING PC	3/4/2019	NF-3 Bill Form / HCFA 1500 Form	1/16/2019	73721	\$ 878.67
5575	0288170730101106	ECLIPSE MEDICAL IMAGING PC	3/4/2019	NF-3 Bill Form / HCFA 1500 Form	1/18/2019	73221	\$ 878.67
5576	0288170730101106	ECLIPSE MEDICAL IMAGING PC	3/4/2019	NF-3 Bill Form / HCFA 1500 Form	1/18/2019	70551	\$ 655.83
5577	0632432690101010	ECLIPSE MEDICAL IMAGING PC	3/4/2019	NF-3 Bill Form / HCFA 1500 Form	1/16/2019	73721	\$ 878.67
5578	0492230940101098	ECLIPSE MEDICAL IMAGING PC	3/4/2019	NF-3 Bill Form / HCFA 1500 Form	12/9/2018	73221	\$ 878.67
5579	0601202160101015	ECLIPSE MEDICAL IMAGING PC	3/4/2019	NF-3 Bill Form / HCFA 1500 Form	1/21/2019	73721	\$ 878.67
5580	0288170730101106	ECLIPSE MEDICAL IMAGING PC	3/7/2019	NF-3 Bill Form / HCFA 1500 Form	1/22/2019	73221	\$ 878.67
5581	0144934160101116	ECLIPSE MEDICAL IMAGING PC	3/7/2019	NF-3 Bill Form / HCFA 1500 Form	1/23/2019	72141	\$ 879.73
5582	0562966140101017	ECLIPSE MEDICAL IMAGING PC	3/7/2019	NF-3 Bill Form / HCFA 1500 Form	1/22/2019	70551	\$ 874.44
5583	0499737080101046	ECLIPSE MEDICAL IMAGING PC	3/7/2019	NF-3 Bill Form / HCFA 1500 Form	1/23/2019	72100	\$ 65.86
5584	0499737080101046	ECLIPSE MEDICAL IMAGING PC	3/7/2019	NF-3 Bill Form / HCFA 1500 Form	1/23/2019	72040	\$ 96.27
5585	0265825100101153	ECLIPSE MEDICAL IMAGING PC	3/7/2019	NF-3 Bill Form / HCFA 1500 Form	1/23/2019	73221	\$ 878.67
5586	0624241100101027	ECLIPSE MEDICAL IMAGING PC	3/7/2019	NF-3 Bill Form / HCFA 1500 Form	1/23/2019	73221	\$ 878.67
5587	0363100960101086	ECLIPSE MEDICAL IMAGING PC	3/7/2019	NF-3 Bill Form / HCFA 1500 Form	1/22/2019	73721	\$ 659.00
5588	0363100960101086	ECLIPSE MEDICAL IMAGING PC	3/7/2019	NF-3 Bill Form / HCFA 1500 Form	1/22/2019	73221	\$ 878.67
5589	0124225860101033	ECLIPSE MEDICAL IMAGING PC	3/7/2019	NF-3 Bill Form / HCFA 1500 Form	1/22/2019	72141	\$ 879.73
5590	0603452780101014	ECLIPSE MEDICAL IMAGING PC	3/8/2019	NF-3 Bill Form / HCFA 1500 Form	1/27/2019	73221	\$ 878.67
5591	0143542300101044	ECLIPSE MEDICAL IMAGING PC	3/8/2019	NF-3 Bill Form / HCFA 1500 Form	1/24/2019	71020	\$ 58.72
5592	0143542300101044	ECLIPSE MEDICAL IMAGING PC	3/8/2019	NF-3 Bill Form / HCFA 1500 Form	1/24/2019	73221	\$ 878.67
5593	0143542300101044	ECLIPSE MEDICAL IMAGING PC	3/8/2019	NF-3 Bill Form / HCFA 1500 Form	1/24/2019	73120	\$ 47.61
5594	0143542300101044	ECLIPSE MEDICAL IMAGING PC	3/8/2019	NF-3 Bill Form / HCFA 1500 Form	1/24/2019	70160	\$ 50.78
5595	0143542300101044	ECLIPSE MEDICAL IMAGING PC	3/8/2019	NF-3 Bill Form / HCFA 1500 Form	1/24/2019	71110	\$ 80.94
5596	0595123120101036	ECLIPSE MEDICAL IMAGING PC	3/8/2019	NF-3 Bill Form / HCFA 1500 Form	1/25/2019	72141	\$ 879.73
5597	0431115880101030	ECLIPSE MEDICAL IMAGING PC	3/8/2019	NF-3 Bill Form / HCFA 1500 Form	1/25/2019	72148	\$ 684.00
5598	0431115880101030	ECLIPSE MEDICAL IMAGING PC	3/8/2019	NF-3 Bill Form / HCFA 1500 Form	1/25/2019	72141	\$ 659.79
5599	0352723140101073	ECLIPSE MEDICAL IMAGING PC	3/8/2019	NF-3 Bill Form / HCFA 1500 Form	1/24/2019	73200	\$ 486.68
5600	0143542300101044	ECLIPSE MEDICAL IMAGING PC	3/8/2019	NF-3 Bill Form / HCFA 1500 Form	1/27/2019	73221	\$ 878.67

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Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
5601	0603452780101014	ECLIPSE MEDICAL IMAGING PC	3/8/2019	NF-3 Bill Form / HCFA 1500 Form	1/27/2019	73721	\$ 878.67
5602	0595123120101036	ECLIPSE MEDICAL IMAGING PC	3/11/2019	NF-3 Bill Form / HCFA 1500 Form	1/27/2019	72146	\$ 959.61
5603	0288170730101106	ECLIPSE MEDICAL IMAGING PC	3/11/2019	NF-3 Bill Form / HCFA 1500 Form	1/28/2019	72141	\$ 659.79
5604	0288170730101106	ECLIPSE MEDICAL IMAGING PC	3/11/2019	NF-3 Bill Form / HCFA 1500 Form	1/28/2019	72148	\$ 912.00
5605	0434864210101023	ECLIPSE MEDICAL IMAGING PC	3/11/2019	NF-3 Bill Form / HCFA 1500 Form	1/25/2019	72148	\$ 912.00
5606	0619236420101068	ECLIPSE MEDICAL IMAGING PC	3/11/2019	NF-3 Bill Form / HCFA 1500 Form	1/25/2019	73221	\$ 878.67
5607	0416637520101160	ECLIPSE MEDICAL IMAGING PC	3/11/2019	NF-3 Bill Form / HCFA 1500 Form	1/25/2019	73721	\$ 878.67
5608	0437100700101091	ECLIPSE MEDICAL IMAGING PC	3/11/2019	NF-3 Bill Form / HCFA 1500 Form	1/24/2019	72146	\$ 959.61
5609	0147527770101273	ECLIPSE MEDICAL IMAGING PC	3/11/2019	NF-3 Bill Form / HCFA 1500 Form	1/15/2019	73721	\$ 878.67
5610	0147527770101273	ECLIPSE MEDICAL IMAGING PC	3/11/2019	NF-3 Bill Form / HCFA 1500 Form	1/15/2019	73070	\$ 52.77
5611	0602775040101015	ECLIPSE MEDICAL IMAGING PC	3/12/2019	NF-3 Bill Form / HCFA 1500 Form	1/29/2019	72141	\$ 879.73
5612	0300980140101098	ECLIPSE MEDICAL IMAGING PC	3/12/2019	NF-3 Bill Form / HCFA 1500 Form	1/27/2019	72148	\$ 912.00
5613	0300980140101098	ECLIPSE MEDICAL IMAGING PC	3/12/2019	NF-3 Bill Form / HCFA 1500 Form	1/27/2019	72141	\$ 659.79
5614	0508123790101031	ECLIPSE MEDICAL IMAGING PC	3/15/2019	NF-3 Bill Form / HCFA 1500 Form	1/30/2019	72148	\$ 912.00
5615	0467436740101060	ECLIPSE MEDICAL IMAGING PC	3/15/2019	NF-3 Bill Form / HCFA 1500 Form	2/3/2019	72141	\$ 879.73
5616	0524252050101025	ECLIPSE MEDICAL IMAGING PC	3/15/2019	NF-3 Bill Form / HCFA 1500 Form	1/31/2019	72148	\$ 912.00
5617	0524252050101025	ECLIPSE MEDICAL IMAGING PC	3/15/2019	NF-3 Bill Form / HCFA 1500 Form	1/31/2019	73721	\$ 659.00
5618	0602775040101015	ECLIPSE MEDICAL IMAGING PC	3/15/2019	NF-3 Bill Form / HCFA 1500 Form	2/1/2019	72146	\$ 959.61
5619	0454791960101041	ECLIPSE MEDICAL IMAGING PC	3/15/2019	NF-3 Bill Form / HCFA 1500 Form	1/30/2019	73221	\$ 878.67
5620	0302276730101012	ECLIPSE MEDICAL IMAGING PC	3/15/2019	NF-3 Bill Form / HCFA 1500 Form	2/1/2019	72040	\$ 96.27
5621	0499737080101046	ECLIPSE MEDICAL IMAGING PC	3/18/2019	NF-3 Bill Form / HCFA 1500 Form	2/5/2019	72148	\$ 912.00
5622	0424201850101017	ECLIPSE MEDICAL IMAGING PC	3/18/2019	NF-3 Bill Form / HCFA 1500 Form	1/31/2019	73221	\$ 878.67
5623	0389103310101012	ECLIPSE MEDICAL IMAGING PC	3/18/2019	NF-3 Bill Form / HCFA 1500 Form	1/31/2019	72141	\$ 879.73
5624	0541861330101016	ECLIPSE MEDICAL IMAGING PC	3/18/2019	NF-3 Bill Form / HCFA 1500 Form	2/1/2019	72141	\$ 879.73
5625	0567063610101019	ECLIPSE MEDICAL IMAGING PC	3/19/2019	NF-3 Bill Form / HCFA 1500 Form	2/5/2019	72148	\$ 912.00
5626	0567063610101019	ECLIPSE MEDICAL IMAGING PC	3/19/2019	NF-3 Bill Form / HCFA 1500 Form	2/5/2019	72141	\$ 659.79
5627	0621798040101014	ECLIPSE MEDICAL IMAGING PC	3/19/2019	NF-3 Bill Form / HCFA 1500 Form	2/5/2019	72148	\$ 912.00
5628	0592543630101015	ECLIPSE MEDICAL IMAGING PC	3/20/2019	NF-3 Bill Form / HCFA 1500 Form	2/4/2019	72148	\$ 912.00
5629	03035190500101026	ECLIPSE MEDICAL IMAGING PC	3/20/2019	NF-3 Bill Form / HCFA 1500 Form	2/5/2019	72148	\$ 912.00
5630	0506452280101017	ECLIPSE MEDICAL IMAGING PC	3/22/2019	NF-3 Bill Form / HCFA 1500 Form	2/7/2019	73221	\$ 878.67
5631	0629961510101011	ECLIPSE MEDICAL IMAGING PC	3/22/2019	NF-3 Bill Form / HCFA 1500 Form	2/8/2019	73221	\$ 878.67
5632	0499737080101046	ECLIPSE MEDICAL IMAGING PC	3/22/2019	NF-3 Bill Form / HCFA 1500 Form	2/8/2019	72146	\$ 959.61
5633	0416637520101152	ECLIPSE MEDICAL IMAGING PC	3/22/2019	NF-3 Bill Form / HCFA 1500 Form	2/6/2019	73221	\$ 878.67
5634	0562966140101017	ECLIPSE MEDICAL IMAGING PC	3/22/2019	NF-3 Bill Form / HCFA 1500 Form	2/7/2019	72141	\$ 659.79
5635	0562966140101017	ECLIPSE MEDICAL IMAGING PC	3/22/2019	NF-3 Bill Form / HCFA 1500 Form	2/7/2019	72148	\$ 912.00
5636	0504915480101096	ECLIPSE MEDICAL IMAGING PC	3/25/2019	NF-3 Bill Form / HCFA 1500 Form	2/8/2019	73721	\$ 878.67
5637	0430190500101092	ECLIPSE MEDICAL IMAGING PC	3/25/2019	NF-3 Bill Form / HCFA 1500 Form	2/7/2019	73221	\$ 878.67
5638	0612917010101025	ECLIPSE MEDICAL IMAGING PC	3/25/2019	NF-3 Bill Form / HCFA 1500 Form	2/12/2019	73721	\$ 878.67
5639	0124225860101033	ECLIPSE MEDICAL IMAGING PC	3/25/2019	NF-3 Bill Form / HCFA 1500 Form	2/12/2019	72148	\$ 912.00
5640	0124225860101033	ECLIPSE MEDICAL IMAGING PC	3/25/2019	NF-3 Bill Form / HCFA 1500 Form	2/12/2019	72141	\$ 659.79
5641	0434864210101023	ECLIPSE MEDICAL IMAGING PC	3/25/2019	NF-3 Bill Form / HCFA 1500 Form	2/13/2019	72141	\$ 879.73
5642	0308342580101017	ECLIPSE MEDICAL IMAGING PC	3/25/2019	NF-3 Bill Form / HCFA 1500 Form	2/12/2019	73200	\$ 486.68
5643	0143542300101044	ECLIPSE MEDICAL IMAGING PC	3/25/2019	NF-3 Bill Form / HCFA 1500 Form	2/10/2019	73721	\$ 659.00
5644	0143542300101044	ECLIPSE MEDICAL IMAGING PC	3/25/2019	NF-3 Bill Form / HCFA 1500 Form	2/10/2019	72141	\$ 879.73
5645	0597676630101042	ECLIPSE MEDICAL IMAGING PC	3/25/2019	NF-3 Bill Form / HCFA 1500 Form	2/11/2019	73620	\$ 56.73
5646	0597676630101042	ECLIPSE MEDICAL IMAGING PC	3/25/2019	NF-3 Bill Form / HCFA 1500 Form	2/11/2019	73221	\$ 878.67
5647	0597676630101042	ECLIPSE MEDICAL IMAGING PC	3/25/2019	NF-3 Bill Form / HCFA 1500 Form	2/11/2019	73600	\$ 54.75
5648	0597676630101042	ECLIPSE MEDICAL IMAGING PC	3/25/2019	NF-3 Bill Form / HCFA 1500 Form	2/11/2019	73100	\$ 46.42
5649	0639984380101018	ECLIPSE MEDICAL IMAGING PC	3/25/2019	NF-3 Bill Form / HCFA 1500 Form	2/6/2019	72148	\$ 912.00
5650	0639984380101018	ECLIPSE MEDICAL IMAGING PC	3/25/2019	NF-3 Bill Form / HCFA 1500 Form	2/6/2019	73221	\$ 659.00
5651	0147527770101273	ECLIPSE MEDICAL IMAGING PC	3/25/2019	NF-3 Bill Form / HCFA 1500 Form	2/8/2019	72148	\$ 912.00
5652	0406981450101010	ECLIPSE MEDICAL IMAGING PC	3/25/2019	NF-3 Bill Form / HCFA 1500 Form	2/11/2019	73221	\$ 878.67
5653	0208026180101144	ECLIPSE MEDICAL IMAGING PC	3/25/2019	NF-3 Bill Form / HCFA 1500 Form	2/14/2019	73221	\$ 878.67
5654	0434306780101058	ECLIPSE MEDICAL IMAGING PC	3/25/2019	NF-3 Bill Form / HCFA 1500 Form	2/11/2019	73721	\$ 878.67
5655	0393040580101013	ECLIPSE MEDICAL IMAGING PC	3/25/2019	NF-3 Bill Form / HCFA 1500 Form	2/8/2019	72040	\$ 72.20
5656	0393040580101013	ECLIPSE MEDICAL IMAGING PC	3/25/2019	NF-3 Bill Form / HCFA 1500 Form	2/8/2019	73221	\$ 878.67
5657	0297498050101102	ECLIPSE MEDICAL IMAGING PC	3/25/2019	NF-3 Bill Form / HCFA 1500 Form	2/8/2019	72148	\$ 912.00
5658	0627570230101011	ECLIPSE MEDICAL IMAGING PC	3/25/2019	NF-3 Bill Form / HCFA 1500 Form	2/12/2019	72148	\$ 912.00
5659	0468400200101027	ECLIPSE MEDICAL IMAGING PC	3/25/2019	NF-3 Bill Form / HCFA 1500 Form	2/11/2019	73221	\$ 878.67
5660	0468400200101027	ECLIPSE MEDICAL IMAGING PC	3/25/2019	NF-3 Bill Form / HCFA 1500 Form	2/11/2019	73120	\$ 47.61
5661	0468400200101027	ECLIPSE MEDICAL IMAGING PC	3/25/2019	NF-3 Bill Form / HCFA 1500 Form	2/11/2019	73140	\$ 40.06
5662	0393040580101013	ECLIPSE MEDICAL IMAGING PC	3/25/2019	NF-3 Bill Form / HCFA 1500 Form	2/11/2019	73721	\$ 878.67
5663	0612917010101025	ECLIPSE MEDICAL IMAGING PC	3/26/2019	NF-3 Bill Form / HCFA 1500 Form	2/1/2019	72141	\$ 659.79
5664	0612917010101025	ECLIPSE MEDICAL IMAGING PC	3/26/2019	NF-3 Bill Form / HCFA 1500 Form	2/1/2019	72148	\$ 912.00
5665	0352723140101073	ECLIPSE MEDICAL IMAGING PC	3/26/2019	NF-3 Bill Form / HCFA 1500 Form	2/6/2019	72125	\$ 436.42
5666	0352723140101073	ECLIPSE MEDICAL IMAGING PC	3/26/2019	NF-3 Bill Form / HCFA 1500 Form	2/6/2019	72131	\$ 581.90
5667	0265825100101153	ECLIPSE MEDICAL IMAGING PC	3/26/2019	NF-3 Bill Form / HCFA 1500 Form	2/13/2019	72148	\$ 912.00
5668	0265825100101153	ECLIPSE MEDICAL IMAGING PC	3/26/2019	NF-3 Bill Form / HCFA 1500 Form	2/13/2019	72141	\$ 659.79
5669	0501849930101054	ECLIPSE MEDICAL IMAGING PC	3/6/2017	NF-3 Bill Form / HCFA 1500 Form	1/20/2017	73221	\$ 878.67
5670	0308342580101017	ECLIPSE MEDICAL IMAGING PC	3/25/2019	NF-3 Bill Form / HCFA 1500 Form	2/6/2019	73700	\$ 486.68

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Exhibit "2" ECLIPSE MEDICAL IMAGING PC

RICO Event	Claim Number	Provider	Date of Mailing	Document Mailed	Date of Service	CPT Code Billed	Charge
5671	0622651090101013	ECLIPSE MEDICAL IMAGING PC	3/26/2019	NF-3 Bill Form / HCFA 1500 Form	1/31/2019	73721	\$ 878.67
5672	0363100960101086	ECLIPSE MEDICAL IMAGING PC	3/29/2019	NF-3 Bill Form / HCFA 1500 Form	2/11/2019	72148	\$ 912.00
5673	0363100960101086	ECLIPSE MEDICAL IMAGING PC	3/29/2019	NF-3 Bill Form / HCFA 1500 Form	2/11/2019	72141	\$ 659.79
5674	0639984380101018	ECLIPSE MEDICAL IMAGING PC	3/29/2019	NF-3 Bill Form / HCFA 1500 Form	2/10/2019	72141	\$ 879.73